#### I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered. SIGNATURE: PATRICK ESCE OWNER

Electronic Signature of Signing Authorized Person(s) Detail

2021 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L18000191592

Entity Name: ATLAS NUTRACEUTICALS LLC

# **Current Principal Place of Business:**

2349 VANDERBILT BEACH RD SUITE 518 NAPLES, FL 34109

# **Current Mailing Address:**

2349 VANDERBILT BEACH RD **SUITE 518** NAPLES, FL 34109 US

## FEI Number: 83-1643384

## Name and Address of Current Registered Agent:

ESCE, PATRICK B 2349 VANDERBILT BEACH RD SUITE 518 NAPLES, FL 34109 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE	: PATRICK ESCE		04/30/2021
	Electronic Signature of Registered Agent		Date
Authorized Person(s) Detail :			
Title	AMBR	Title	AMBR
Name	ESCE, PATRICK B	Name	MITCHELL, JEREMY M
Address	2349 VANDERBILT BEACH RD SUITE 518	Address	2349 VANDERBILT BEACH RD SUITE 508
City-State-Zip:	NAPLES FL 34109	City-State-Zip:	NAPLES FL 34109

FILED Apr 30, 2021 Secretary of State 7288540740CC

Certificate of Status Desired: No

04/30/2021