

**2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L22000047719

**Entity Name:** ATLAS RELOADED LLC

**Current Principal Place of Business:**

20493 MEETING STREET  
BOCA RATON, FL 33434

**Current Mailing Address:**

20493 MEETING STREET  
BOCA RATON, FL 33434 US

**FEI Number: 88-0642581**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

DECOTTO, SEGUNDO  
20493 MEETING STREET  
BOCA RATON, FL 33434 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title	MGR	Title	AMBR
Name	DECOTTO, SEGUNDO	Name	GHELFI, OSCAR A
Address	20493 MEETING STREET	Address	21 874
City-State-Zip:	BOCA RATON FL 33434	City-State-Zip:	MERCEDES BA 6600
Title	AMBR		
Name	COLOMBO, YANINA P		
Address	36 268		
City-State-Zip:	MERCEDES BA 6600		

*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: SEGUNDO DECOTTO**

**MANAGER**

**04/28/2023**

Electronic Signature of Signing Authorized Person(s) Detail

Date