

F09 000000 2271

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FL

AUG - 3 2021
C. KIRK

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: What A Trip, Ltd, Inc.

Name of Corporation

DOCUMENT NUMBER: F09000002271

The enclosed Amendment and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

John Hannon

Name of Contact Person

Atlas Travel

Firm/Company

200 Donald Lynch Boulevard, Suite 103

Address

Marlborough, MA 01752

City/State and Zip Code

Billing@atlastravel.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John Hannon

at (508) 488-1150

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$35 Filing Fee

☒ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy

☐ \$52.50 Filing Fee,
Certificate of Status &
Certified Copy

Mailing Address:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

(Pursuant to s. 607.1504, F.S.)

(1-3 MUST BE COMPLETED)

F09000002271

(Document number of corporation (if known))

What A Trip, Ltd., Inc.

(Name of corporation as it appears on the records of the Department of State)

New York

, June 5, 2009

(Incorporated under laws of)

(Date authorized to do business in Florida)

(4-7 COMPLETE ONLY THE APPLICABLE CHANGES)

4. If the amendment changes the name of the corporation, when was the change effected under the laws of its jurisdiction of incorporation? November 19, 2019

Atlas Travel Home, Inc.

(Name of corporation after the amendment, adding suffix "corporation," "company," or "incorporated," or appropriate abbreviation, if not contained in new name of the corporation)

(If new name is unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

6. If the amendment changes the period of duration, indicate new period of duration.

(New duration)

7. If the amendment changes the jurisdiction of incorporation, indicate new jurisdiction.

(New jurisdiction)

8. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent

(Florida street address)

New Registered Office Address:

(City)

Florida

(Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

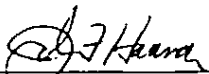
Signature of New Registered Agent, if changing

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9. If the amendment changes person, title or capacity in accordance with 607.1504 (4), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove

10. Attached is a certificate or document of similar import, evidencing the amendment, authenticated not more than 90 days prior to delivery of the application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the laws of which it is incorporated.

 _____ (Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	
_____ JOHN F. HANNON (Typed or printed name of person signing)	_____ CFO (Title of person signing)

FILING FEE \$35.00

**STATE OF NEW YORK
DEPARTMENT OF STATE**

I hereby certify that the annexed copy for ATLAS TRAVEL HOME, INC., File Number 191119000403 has been compared with the original document in the custody of the Secretary of State and that the same is true copy of said original.

WITNESS my hand and official seal of the
Department of State, at the City of Albany,
on June 23, 2021.



A handwritten signature in black ink that reads "Brendan C. Hughes".

Brendan C. Hughes
Executive Deputy Secretary of State

191119000403



Division of Corporations,
State Records and
Uniform Commercial Code

New York State
Department of State
DIVISION OF CORPORATIONS,
STATE RECORDS AND
UNIFORM COMMERCIAL CODE
One Commerce Plaza
99 Washington Ave.
Albany, NY 12231-0001
www.dos.ny.gov

CSC 45
Drawdown

CERTIFICATE OF AMENDMENT
OF THE
CERTIFICATE OF INCORPORATION
OF

What a Trip, LTD

(Insert the Current Name of Domestic Corporation)

Under Section 805 of the Business Corporation Law

FIRST: The current name of the corporation is:

What a Trip, LTD

If the name of the corporation has been previously changed, the name under which it was originally formed is:

American Learning Center, Inc.

SECOND: The date of filing of the certificate of incorporation with the Department of State is:

September 14, 1989

THIRD: The amendment effected by this certificate of amendment is as follows:

The subject matter and full text of each amended paragraph must be stated.

FOR EXAMPLE, a certificate of amendment changing the name of the corporation would read as follows:

Paragraph FIRST of the Certificate of Incorporation relating to the name of the corporation is amended to read in its entirety as follows:

FIRST: The name of the corporation is (new name.)

Paragraph FIRST of the Certificate of Incorporation relating to
the name

is amended to read in its entirety as follows:

FIRST: The name of the corporation is Atlas Travel Home, Inc.

Paragraph THIRD of the Certificate of Incorporation relating to
the address to which the Secretary of State shall forward copies of process accepted
on behalf of the corporation

is amended to read in its entirety as follows:

THIRD: The address to which the Secretary of State shall forward copies of process
accepted on behalf of the corporation is as follows:

200 DONALD LYNCH BLVD., SUITE 323, MARLBOROUGH, MA 01752

FOURTH: The certificate of amendment was authorized by: *(Check the appropriate box)*

- ☐ The vote of the board of directors followed by a vote of a majority of all outstanding
shares entitled to vote thereon at a meeting of shareholders.
- ☒ The vote of the board of directors followed by the unanimous written consent of the
holders of all outstanding shares.

X /s/ Elaine J. Osgood
(Signature)

Elaine J. Osgood
(Name of Signer)

CEO
(Title of Signer)

CSC 45
Drawdown

403

CERTIFICATE OF AMENDMENT
OF THE
CERTIFICATE OF INCORPORATION
OF

What a Trip, LTD

(Insert Current Name of Domestic Corporation)

Under Section 805 of the Business Corporation Law

Filer's Name and Mailing Address:

SEDER & CHANDLER

Name:

Company, if Applicable:

339 MAIN ST

Mailing Address:

WORCESTER, MA 01608-1521

City, State and Zip Code:

Cust. Ref. # 049408 RHM

NOTES:

1. The name of the corporation and its date of incorporation provided on this certificate must exactly match the records of the Department of State. This information should be verified on the Department of State's website at www.dos.ny.gov.
2. This form was prepared by the New York State Department of State. It does not contain all optional provisions under the law. You are not required to use this form. You may draft your own form or use forms available at legal stationery stores.
3. The Department of State recommends that all documents be prepared under the guidance of an attorney.
4. The certificate must be submitted with a \$60 filing fee.

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STATE OF NEW YORK
DEPARTMENT OF STATE

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BY: mip

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