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COVER LETTER

Division of Cor					
Find A Wa	y Holdings, LLC				
SUBJECT:	Name of Limited Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.			
Please return all correspo	ndence concerning this matter	to the following:			
	Daniel Pearce				
	CV Family Corporation	Name of Person			
	P.O. Box 470367	Firm/Company			
	Celebration, FL 34747	Address			
•.	dj@cvfamilycorp.com	City/State and Zip Code	cation)		
Can forth on information of		·			
Daniel Pearce	oncerning this matter, please ca	407 374-2540	PH 2:		
Name o	d Person	at () Area Code Daytime	Telephone Number		
Enclosed is a check for the	he following amount:				
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	ING ADDRESS:	STREET/COURIE Registration Section			

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

TO:

Registration Section

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

TO ARTICLES OF ORGANIZATION OF

Find A Way Holdings, LLC

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appear Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability Company Florida document number	were filed on	22/2011	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company he	<u>re</u> :	
ATC Express, LLC			
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the de	esignation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:			. 4,
(Principal office address MUST BE A STREET ADDRESS)			10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Enter new mailing address, if applicable:			TARY CONTROL
(Mailing address MAY BE A POST OFFICE BOX)			F STATE ONS
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		our records, en	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Flor	ida street address	
		Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of provided for in C	my duties, and La Thapter 605, F.S.	m familiar with and Or, if this docu <mark>men</mark> t i:

If Changing Registered Agent, Signature of New Registered Agent

•

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Celebration Property Holdings. LLC	P.O. Box 470367	□ Add
		Celebration, FL 34747	
			Remove
			☐ Change
MGK	Find A Way Capital, LLC	P.O. Box 470367	
		Celebration, FL 34747	
	•		Change
			Remove
			□ Change
			Add
			☐ Remove
			☐ Change
			☐ Add
		<u></u>	☐ Remove
			☐ Change
			☐ Remove
		•	□ Change

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L'éfortius dats dé ath	August 1, 2019	
	er than the date of filing: (optional), the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Put	rsuant to 605.0207
 Note: If the date inser 	ed in this block does not meet the applicable statutory filing requirements, this date will	not be listed as
document's effective d	ite on the Department of State's records.	
the record specifies	a delayed effective date, but not an effective time, at 12:01 a.m. on	the earlier of
) The 90th day aft	the record is filed.	
S 1.2	2010	
August 13 Dated	2019	
Dated		
/-	Signature of a member or authorized representative of a member	
Christophe	· Vitilo	
	Typed or printed name of signee	

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Filing Fee: \$25.00