Fax: 18775036086

To:

Fax: (850) 617-6383 Division of Corporations Page: 1 of 4

10/15/2019 2:03 PM



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : FANDUL ENTERPRISES LLC

Account Number : I2019000080 : (305)603-8791 Phone Fax Number : (877)503-6086

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

Email Address:_

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Fram: Robert Fanjul

Fax: 18775036086

To:

Fax: (850) 617-6383

Page: 2 of 4

10/15/2019 2:03 PM

ARTICLES OF AMENDMENT TO \$\foatsign\$ ARTICLES OF ORGANIZATION OF

FILED

ATEK LLC

(Name of the Limit	(A Florida Limited Liability Company)
The Articles of Organization for this Limited Li Florida document number $\frac{L19000117309}{L19000117309}$	iability Company were filed on 04/30/2019 3000 Explosion assigned
This amendment is submitted to amend the follo	owing:
A. If amending name, enter the new name of	f the limited liability company here:
The new name must be distinguishable and contain the w	vords "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	able:
(Principal office address MUST BE A STREE	TADDRESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE	BOX)
B. If amending the registered agent and/ registered agent and/or the new registered of	for registered office address on our records, <u>enter the name of the new</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zıp Code

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

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

From: Robert Fanjul

Fax: 18775036086

Ta:

Fax: (850) 617-6383

Page: 3 of 4 10/15/2019 2:03 PM

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	CARLOS A GIRALDO VARGAS	2387 SW ISLAND CREEK TRAIL	
		PALM CITY, FL 34990	= Add
			□ Remove
			Change
			Remove
			□ Change
			Add
			Remove
			Change
			Add
			□ Remove
			Change
			Add
			Remove
			Change
			Add
			□ Remove
			Change

n: Robert Fanjul	Fax: 18775036086	Ta;	Fax: (850) 617-6383	Page: 4 of 4	10/15/2019 2:03
D. If amending	any other information	n, enter change(s) here	e: (Attach additional sheets, if n	ecessary.)	
				,,	
					
		· · · · · · · · · · · · · · · · · · ·			
					
					
		<u> </u>			
					
-					
					
				-	
					
E. Effective da	te, if other than the du	ite of filing:	(on	tional)	
(If an effective d <u>Note:</u> If the e	ate is listed, the date must be	specific and cannot be prior does not meet the applic	to date of filing or more than 90 days aft	ar Glima I Dumunas en 406	.0207 (3)(b) ed as the
If the record s (b) The 90th	pecifies a delayed el day after the record	ffective date, but no I is filed.	t an effective time, at 12:01	a.m. on the earlie	er of:
Dated OCTO	BER 15	2019			
X			60		
_	5 ig	nature of a member or author	prized representative of a member	***************************************	

Page 3 of 3

Typed or pointed name of signee

Filing Fee: \$25.00