

121 000050607

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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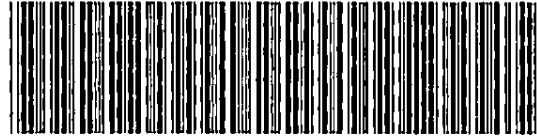
(Business Entity Name)

(Document Number)

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2022 MAY 31 AM 11:13
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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: AMERICAN TRUST HOLDINGS, LLC.

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

EMMANUEL SANTIAGO-PEREZ

Name of Person

ATL HOLDINGS, LLC.

Firm/Company

910 VAQUERO LN

Address

KISSIMMEE, FL 34741

City/State and Zip Code

EMSANTIAGO@GMAIL.COM

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

For further information concerning this matter, please call:

EMMANUEL SANTIAGO-PEREZ

939 630-6699
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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)

Mailing Address:

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

Street Address:

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED

AMERICAN TRUST HOLDINGS, LLC.

2022 MAY 31 AM 11:13

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

SECRET
TAL STATE
FL

The Articles of Organization for this Limited Liability Company were filed on 01/27/2021 and assigned Florida document number L21000050607.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

ATL HOLDINGS, LLC.

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

N/A

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

N/A

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida _____

City

Zip 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

