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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates of	f Status
Special Instructions to	Filing Officer:	<u>~</u>

Office Use Only

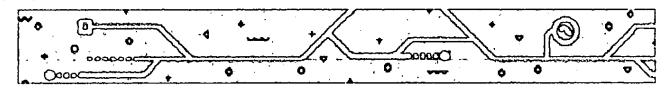


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FILED



## zenbusiness

Jan 6, 2023

Florida Secretary of State Division of Corporations 2415 N Monroe St Suite 810 Tallahassee, FL 32303

RE: Golden Routes LLC

To Whom It May Concern:

Attached please find the executed **ARTICLES OF AMENDMENT** for the above referenced. Please review and file the attached document on a routine basis. Please note that this document is signed with a conformed signature.

#### PLEASE DO NOT INCLUDE THIS COVER PAGE IN THE FILING EVIDENCE.

Once completed please forward the filed confirmation or notification to the address listed below:

ZenBusiness Inc Naketa Ford 336 E College Ave, Ste 301 Tallahassee, FL 32301

If you have any questions, please feel free to contact me at 844-493-6249 or at fulfillment@zenbusiness.com.

Thank you. Naketa Ford

ZenBusiness Customer Success

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ATG Ventures LLC		
( <u>Name of the Limited Liability Con</u> (A Florida Limit	npany as it now appears on our reco ed Liability Company)	rds.)
The Articles of Organization for this Limited Liability Compa	any were filed on 05-17-2022	and assigned
lorida document number 1.22000230467		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited li	iability company here:	
Golden Routes LLC		
The new name must be distinguishable and contain the words "Limited Li	ability Company," the designation "LI	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
		202 5.5
Enter new mailing address, if applicable:		
•		75
(Mailing address MAY BE A POST OFFICE BOX)		
	····	
3. If amending the registered agent and/or registered offic		
gent and/or the new registered office address here:	ce address on our records, ente	er the name of the new register
		: • 1
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addr	WEE.
	isher Frontied street later	e.a.
	, F	F <b>lorida</b> Zip Code
	$\cup m_{i}$	Lip 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 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
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ective date, if other than the effective date is listed, the date muse: If the date inserted in this burnent's effective date on the I	lock does not meet the appl	licable statutory filing	(optional ore than 90 days after filing grequirements, this da	l)  19.) Pursuant to 605.020  1e will not be listed a
cord specifies a delayed effecti sfiled.	ve date, but not an effective	time, at 12:01 a.m. o	on the earlier of: (b)	The 90th day after the
lan 6	2023	·		
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ed/s/ Nicholas Termini				