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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
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COVER LETTER

TO:	Registration Section Division of Corpor			·
CHD H	ecr.	ATMOSPH	ERIC G2, LL	.C
SUBJI	ECT:	Name of L	imited Liability (Company
				ation to Transact Business in Florida," Certificate of ted liability company to transact business in Florida
Please	return all corresponde	ence concerning this matter to the f	ollowing:	
		Steph	nanie Wright	
		Na	me of Person	
		Fir	m/Company	
		1266 W Paces	Ferry Rd NW	/ STE 627
			Address	
		Atlant	a, GA 30327	
		City/Sta	ate and Zip Code	
		accounting@a		
	 -	E-mail address: (to be used	for future annual	l report notification)
For fu	ther information conc	erning this matter, please call:		
	[Daniel Evans	_at (518	213-0906
	N	ame of Contact Person	Area Code	Daytime Telephone Number
	MAILING ADDR Division of Corpora Registration Section P.O. Box 6327 Tallahassee, Ft. 32.	ations n		STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301
		for the following amount: payable to: FLORIDA DEPARTS	MENT OF STA	TE
	☐ \$125.00 Filing	· ·	□ \$155.00	Filing Fee & S160.00 Filing Fee, Certificat of Status & Certified Copy



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Date: 04/	23/2024	Account#: I20000000088 For any issues please contact Xavian Brown
	Xavian Brown	518-213-0739
Reference #:	2331095	
	ATMOSPHER	RIC G2, LLC
✓ Articles of ✓ Amendme	Incorporation/Authorization to Ti	ransact Business
☐ Change of		
Reinstater		
☐ Conversio	n	
☐ Merger☐ Dissolution☐	n/Withdrawal	
Fictitious I	Name	
Other		
Authorized Amou	nt: \$125.00	_
Signature:	7/m-	_

F: 800.944.6607

and accept the obligations of my position as registered agent.

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605,0902, FLORIDA STATUTEX, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREKIN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA: ATMOSPHERIC G2, LLC (Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC") (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C." or "LLC.") 87-0981970 Delaware (FEI number, if applicable) (Jurisdiction under the law of which foreign limited liability company is organized) (Date first transacted business in Florida, if prior to registration.) (See sections 605 0904 & 605 0905, F.S. to determine penalty liability.) 1266 W Paces Ferry Rd NW STE 627 1266 W Paces Ferry Rd NW STE 627 (Street Address of Principal Office) (Mailing Address) Atlanta, GA Atlanta, GA 30327 30327 7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable) Cogency Global Inc. Name: 115 North Calhoun St. Suite 4 Office Address: 32301 Tallahassee Florida (City) Registered agent's acceptance: Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, 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

Daniel Evans

(Registered agent's signature)

Authorized Ste 627 Person Atlanta, GA 30327
Member Address: 266 W Paces Ferry Rd Authorized Ste 627 Person Atlanta, GA 30327 Other
Authorized Person Atlanta, GA 30327 Other Manager Mame: Erin Rimmel Member Address: 266 W Paces Ferry Rd Authorized Person Atlanta, GA 30327
Atlanta, GA 30327 Other Other Manager Name: Erin Rimmel Member Address: 266 W Paces Ferry Rd Authorized Ste 627 Atlanta, GA 30327
Manager Name: Erin Rimmel Member Address: 266 W Paces Ferry Rd Ste 627 Person Atlanta, GA 30327
Member Address: 266 W Paces Ferry Rd Authorized Ste 627 Person Atlanta, GA 30327
Authorized Ste 627 Person Atlanta, GA 30327
Person Atlanta, GA 30327
reison
Othor
Other
Manager Name:
Member Address:
Authorized
Person
OtherOther
nment will be imaged for reporting purposes only. Non-partment of State Annual Report form. The henticated by the official having custody of records in the foreign language, a translation of the certificate under oath. Florida Statutes. I am aware that any false information be felony as provided for in s.817.155, F.S.
rized person
par hen for

Typed or printed name of signee

Page 1

Delaware The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "ATMOSPHERIC G2, LLC" IS DULY FORMED

UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD STANDING AND

HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS OFFICE SHOW, AS

OF THE TWENTY-SECOND DAY OF APRIL, A.D. 2024.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ATMOSPHERIC G2, LLC" WAS FORMED ON THE FIFTH DAY OF APRIL, A.D. 2021.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE BEEN PAID TO DATE.

Authentication: 203300413

Date: 04-22-24