(Re	questor's Name)	_
(Ad	dress)	
(Ad	dress)	
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	
		;





800184094768

08/17/10--01016--023 \*\*43.75



Amena CUS Ma 8/18/10

## **COVER LETTER**

**TO**: Amendment Section Division of Corporations

NAME OF COR	PORATION: <u>ASSOCIATI</u>	ON OF THE DEVELOP	MENT OF ATREL INC.
DOCUMENT NU	MBER:		
The enclosed Artic	les of Amendment and fee	are submitted for filing.	
Please return all co	rrespondence concerning th	is matter to the following:	
	MARC DIERE		
	(Name of C	Contact Person)	
<u>AS</u>	SOCIATION OF THE DI (Firm	EVELOPMENT OF ATRE (Company)	EL INC.
<del></del>	1531 BROAD	OWAY dress)	<del></del>
	(Au	uress)	
	RIVIERA BEA	CH, FL 33404	
<del></del>		te and Zip Code)	
•	E-mail address: (to be used for fi	uture annual report notification)	
For further information	concerning this matter, please c	all:	
MARC DI	ERESTIL e of Contact)	at(561) 844-00-	41
(Nam	e of Contact)	(Area Code & Daytime	Telephone Number)
Enclosed is a check for	the following amount made pay	able to the Florida Department o	f State:
☐ \$35 Filing Fee	\$43.75 Filing Fee &	☐ \$43.75 Filing Fee &	☐ 52.50 Filing Fee
	Certificate of Status	Certified Copy	Certificate of Status
		(Additional copy is	Certified Copy
		enclosed)	(Additional Copy is enclosed
<u>Majli</u>	ng Address	Street Address	
	dment Section	Amendment Section	
D		Dississan af Camanana	

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

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

## Articles of Amendment to Articles of Incorporation of

ASSOCIATION FO			
(Name of Corporation	as currently file	d with the Florida De	pt. of State)
(Documer	nt Number of Cor	poration (if Known)	<del></del>
Pursuant to the provisions of section 617.1006 The following amendment(s) to its Articles of		his Florida Not For Pro	fit Corporation adopts
A. If amending name, enter the new na	me of the corpor	ration:	
The new name must be distinguishable and con			
Abbreviation "Corp." or "Inc." "Company" of	ir Co, may not	<u>ve useu in ine name</u>	<b>.</b>
B. Enter new principal office address, i			
(Principal office address MUST BE A STREE	21 ADDKE221		
			NG 17 PH
	-		
C. Enter new mailing address, if applica			
(Mailing address MAY BE A POST OFF	ICE BOX)		3 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
D. If amending the registered agent/or r new registered agent and / or the new			enter the name of the
Name of New Registered Agent:			
New Registered Office Address:	(Flor	ida street address)	
			, Florida
		(City)	(Zip Code)
N. D. 14 . 14 . 45 Ct. 14 . 27 . 18 . 1		- # A A-	
New Registered Agent's Signature, if ch I hereby accept the appointment as registe position.			ept the obligations of the
_	Signature of New I	Registered Agent, if cha	nging

## If amending the officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and /or Director being added: (Attach additional sheets, if necessary)

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			☐ Add☐ ☐ Remove
			□ Add □ Remove
			□ Add □ Remove
	nding or adding additional additional additional sheets, if necessary)	Articles, enter change (s) here:  (Be specific)	
ADDING	ARTICLE 8 – PROVISI	ONS & DISSOLUTION	
The organ	nization is organized exclusiv	vely for charitable, religious education	onal, and/or scientific purposes_
under Inte	ernal Revenue Code section:	501 (c) (3), or corresponding section	n of any future federal tax of
code.			
	solution of this organization	assets will be distributed for one of	r more evernt nurnoces within
_	<del>-</del>		
		de Section 501 (c) (3), or correspon	
_federal ta	ax code, or will be distribu	uted to the federal government, or	to a state of local governmen
for a publi	c purpose.		
			•

The date of each amendment (s) adoption:	AUGUST 10 <sup>TH</sup> , 2010
	(date of adoption is required)
Effective date <u>if applicable:</u>	
(no mor	re than 90 days after amendment file date)
Adoption of Amendment (s)	CHECK ONE)
The amendments(s) was/were adopted by the mer was/were sufficient for approval.	nbers and the number of votes cast for the amendment (s)
☐ There are no members or members entitled to vote of adopted by the board of directors.	on the amendments(s). The amendment(s) was/were
Dated	10
Signature Marchairmen of vice	chairman of the board, president or other officer-if directors
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	by an incorporator - if in the hands of a receiver, trustee, or
<u>M</u> A	ARC DIERESTIL
(Typed	or printed name of person signing)
P	RESIDENT
	Title of person signing)