

PD60000039197

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

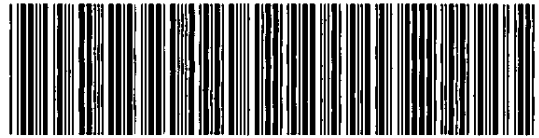
(Business Entity Name)

(Document Number)

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 SEP 21 AM 9:21

Roberts SEP 23 2009



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 19, 2009

THOMAS MILO
ATLANTIC COAST ATM INC
10702 CEDAR FOREST CIR
CLERMONT, FL 34711

SUBJECT: ATLANTIC COAST ATM INC
Ref. Number: P06000039197

We have received your document for ATLANTIC COAST ATM INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check only one box under the adoption of amendment.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6892.

Tina Roberts
Regulatory Specialist II

Letter Number: 809A00028153

RECEIVED
2009 SEP 21 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: Atlantic Coast ATM Inc.

DOCUMENT NUMBER: PO6000039197

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Thomas Milo
Name of Contact Person

Atlantic Coast ATM Inc.
Firm/ Company

10702 Cedar Forest Circle
Address

Clermont, FL 34711
City/ State and Zip Code

Sweetp63225@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Thomas Milo at (954) 464-1631
Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|--|---|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy is enclosed) |
|---|--|--|---|

Mailing Address

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

Street Address

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

Articles of Amendment

Articles of Incorporation
of

Atlantic Coast ATM Inc

(Name of Corporation as currently filed with the Florida Dept. of State)

PO60000039197

(Document Number of Corporation (if known))

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 SEP 21 AM 9:21

Pursuant to the provisions of section 607.1006, Florida Statutes, this **Florida Profit Corporation** adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

Thomas Milo
10702 Cedar Forest Circle
Clermont, FL 34711

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

10702 Cedar Forest Circle
Clermont, FL 34711

D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent:

Thomas Milo

New Registered Office Address:

10702 Cedar Forest Circle

(Florida street address)

Clermont, FL, Florida 34711

(City)

(Zip Code)

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

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.


Signature of New Registered Agent, if changing

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>	<u>Type of Action</u>
VP	John Katzechnik	2897 NW 68 th Ln. Margate, FL 33063	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
SEC.	Donna Katzechnik	2897 NW 68 th Ln. Margate, FL 33063	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
VP	Lori Milo	10702 Cedar Forest Circle Clermont, FL 34711	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove

E. If amending or adding additional Articles, enter change(s) here:
(attach additional sheets, if necessary). (Be specific)

☒ Add

Tres. Richard Gillette 11920 Coral Place
Boca Raton, FL 33428

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:
(if not applicable, indicate N/A)

P: Thomas Milo shares : 50
VP: Lori Milo shares : 1
TRES: Richard Gillette shares : 49

The date of each amendment(s) adoption: August 13, 2009
(date of adoption is required)

Effective date if applicable: _____
(no more than 90 days after amendment file date)

Adoption of Amendment(s) (CHECK ONE)

JM ☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):

"The number of votes cast for the amendment(s) 0 was/were sufficient for approval

by Atlantic Coast ATM, Inc.
(voting group)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☒ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated August 13, 2009

Signature [Signature]

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Thomas Milo

(Typed or printed name of person signing)

Pres.

(Title of person signing)