2009 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P07000031626

Entity Name: ATRM INVESTMENTS INC

FILED Oct 30, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

17033 S. DIXIE HWY 18240 SW 110 AVE SUITE-B MIAMI, FL 33157 US

MIAMI, FL 33157

New Mailing Address: Current Mailing Address:

17033 S. DIXIE HWY 18240 SW 110 AVE SUITE-B MIAMI, FL 33157 US MIAMI, FL 33157

FEI Number: 20-8620269 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

WRIGHT, ANTRON WRIGHT, ANTRON 18240 SW 110 AVE. 8440 S. DIXIE HWY MIAMI, FL 33157 **UNIT 703** MIAMI, FL 33143 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ANTRON WRIGHT 10/30/2009

> Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

WRIGHT, ANTRON WRIGHT, ANTRON Name: Name: 6625 MIAMI LAKES DR., STE. 412 8440 S. DIXIE HWY - UNIT 703 Address: Address:

City-St-Zip: MIAMI LAKES, FL 33014 US City-St-Zip: MIAMI, FL 33143 US

Title: Title: () Delete (X) Change () Addition BECKFORD, MARK BECKFORD, GREGORY Name: Name:

17033 S. DIXIE HWY STE -B 11630 SW 183 STREET Address: Address: MIAMI, FL 33157 MIAMI, FL 33157 City-St-Zip: City-St-Zip:

Title: (X) Change () Addition Title: () Delete HEADS, CARA CARTER, VICTOR Name: Name:

17033 S. DIXIE HWY STE-B 8440 S. DIXIE HWY - UNIT 703 Address Address:

City-St-Zip: MIAMI, FL 33157 City-St-Zip: MIAMI, FL 33143

Title: (X) Delete Title: () Change () Addition Name: Name:

FERGUSON, TRACI Address: 17033 S. DIXIE HWY STE -B Address: City-St-Zip: MIAMI, FL 33157 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANTRON WRIGHT D 10/30/2009