

PO 7000058548

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☐ PICK-UP

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(Business Entity Name)

(Document Number)

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FILED  
14 JUN -9 PM 4:22  
SECRETARY OF STATE  
HALLMARKS FLD OPID A

7/1/11

Amend.

6-9-11 DC



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 24, 2011

KONSTANTIN POPOV  
ATLANTIC  
19380 COLLINS AVE., SUITE 427  
SUNNY ISLES, FL 33160

SUBJECT: ATLANTIC EXPORTS "INC"  
Ref. Number: P07000058548

We have received your document and check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

**Adding "of Florida" or "Florida" to the end of a name is not acceptable.**

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) 245-6906.

Darlene Connell  
Regulatory Specialist II

Letter Number: 211A00012778

RECEIVED  
MAY -9 AM 9:52  
DIVISION OF STATE  
CORPORATIONS, FLORIDA

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**NAME OF CORPORATION:** ATLANTIC EXPORTS "INC"

**DOCUMENT NUMBER:** P07000058548

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

Please return all correspondence concerning this matter to the following:

Konstantin Popov

Name of Contact Person

ATLANTIC

Firm/ Company

19380 COLLINS AVENUE, Suite 427

Address

SUNNY ISLES FL 33160

City/ State and Zip Code

atlantic1212@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Konstantin Popov

Name of Contact Person

at ( 305 )

6191057  
Area Code & Daytime Telephone Number

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

☐ \$35 Filing Fee

☒ \$43.75 Filing Fee &  
Certificate of Status

☐ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is enclosed)

☒ \$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  
to  
Articles of Incorporation  
of

ATLANTIC EXPORTS "INC"

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

P07000058548

(Document Number of Corporation (if known))

FILED  
11 JUN -9 PM 4:22  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

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:**

ATLANTIC ALLIANCE, INC.,

*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:**

19380 COLLINS AVE. SUITE 427B

(Principal office address MUST BE A STREET ADDRESS)

SUNNY ISLES FL 33160

**C. Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

19380 COLLINS AVE. SUITE 427B

SUNNY ISLES FL 33160

**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:

POPOV KONSTANTIN

New Registered Office Address:

19380 COLLINS AVE, SUITE 427B

(Florida street address)

SUNNY ISLES

(City)

Florida 33160

(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>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input 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)*

N/A

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**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)*

N/A

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The date of each amendment(s) adoption: \_\_\_\_\_

06-03-11

(date of adoption is required)

Effective date if applicable: \_\_\_\_\_

(no more than 90 days after amendment file date)

Adoption of Amendment(s)

**(CHECK ONE)**

☐ 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) was/were sufficient for approval

by \_\_\_\_\_."

(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 06/03/2011

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)

KONSTANTIN POPOV

(Typed or printed name of person signing)

PRESIDENT

(Title of person signing)