P12000104198

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COVER LETTER

TO: Amendment Section
Division of Corporations

Tallahassee, FL 32314

NAME OF CORPO	Prime ATM Inc		
	IBER: P12000104198		
The enclosed Article	s of Amendment and fee are su	bmitted for filing.	
Please return all com	espondence concerning this ma	tter to the following:	
	Anthony Berk		
		Name of Contact Perso	n
	Prime ATM Inc		
		Firm/ Company	
	PO Box 111071		
	Address		
	Naples, FL 34108		
		City/ State and Zip Cod	e
	julieLwoodman@gmail.com		
		sed for future annual report	notification)
	,	•	,
For further informati	on concerning this matter, pleas	se call:	
Anthony Berk		at (<u>305</u>	992-0424
Name of Contact Person			de & Daytime Telephone Number
Enclosed is a check t	or the following amount made	payable to the Florida Dep	artment of State:
□ \$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	■\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	Certificate of Status Certified Copy (Additional Copy is enclosed)
Mailing Address			Address
Amendment Section		Amendment Section	
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

Prime ATM Inc			
(Name	of Corporation as curren	tly filed with the Florida D	ept. of State)
P12000104198			
	(Document Number	of Corporation (if known)	
Pursuant to the provisions of section 607. its Articles of Incorporation:	1006, Florida Statutes, this	s Florida Profit Corporation	adopts the following amendment(s) to
A. If amending name, enter the new na	ame of the corporation:		
N/A			The new
name must be distinguishable and contain "Inc.," or Co.," or the designation "Contrartered," "professional association,"	Corp," "Inc," or "Co".	A professional corporation	ed" or the abbreviation "Corp.," n name must contain the word
B. Enter new principal office address,	if annlicable:	N/A	
(Principal office address MUST BE A S			202 2
			<u></u>
C. Enter new mailing address, if appl	icable:	N 1/4	SSI O
(Mailing address MAY BE A POST		N/A	- Fig. 32 [T]
		 	27
D. If amending the registered agent ar			name of the
new registered agent and/or the new		<u>is:</u>	
Name of New Registered Agent	Anthony Berk		
	6145 Lee Ann Lane		
	(Florida s	treet address)	
New Registered Office Address:	Naples		34109 , Florida
		(City)	(Zip Code)
New Registered Agent's Signature, if c I hereby accept the appointment as regist	hanging Registered Ager tered agent I am familiar	i <u>t:</u> with and accept the obligat	tions of the position.
Thereby decept me appointment as register	erea agem. Tum jummu.	The tradepolitic oxinguity	to the top state production.
/ }	1ATO		
[ln	10 BUL	· <u> </u>	
	Signature of New	Registered Agent, if changin	ng .

Check if applicable

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

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)

Example:

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	PT	John Doe	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	Name	Address
1) Change	P	Julie Woodman	6145 Lee Ann Lane
Add			Naples, FL 34109
X Remove			
2) Change	P	Anthony Berk	6145 Lee Ann Lanc
X Add			Naples, FL 34109
Remove 3) Change			- 2 T
Add			SSE TO
Remove			
4) Change			
Add			
Remove			
5) Change		<u> </u>	
Add			
Remove			
6) Change			
Add			
Remove			

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

	6 June 2022	io a a a
The date of each amendment		, if other than the
late this document was signed	6 June 2022	
Effective date <u>if applicable</u> :	6 June 2022	
<u></u>	(no more than 90 days after amendment file date)	
	this block does not meet the applicable statutory filing requirements, he Department of State's records.	this date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
The amendment(s) was/wer action was not required.	re adopted by the incorporators, or board of directors without sharehold	er action and shareholder
☐ The amendment(s) was/wei by the shareholders was/wei	re adopted by the shareholders. The number of votes cast for the amendere sufficient for approval.	iment(s)
☐ The amendment(s) was/wei must be separately provide	re approved by the shareholders through voting groups. The following seed for each voting group entitled to vote separately on the amendment(s	stalement):
"The number of votes	s cast for the amendment(s) was/were sufficient for approval	2022 FALL
by	(voting group)	FILL ANASS
Dated	June 2022	WIO PH 4: 2
	director, president or other officer - if directors or officers have not	
	elected, by an incorporator - if in the hands of a receiver, trustee, or oth	
aţ	pointed fiduciary by that fiduciary)	
	Julie L. Woodman	
	(Typed or printed name of person signing)	
	President	
	(Title of person signing)	