P13000052008

(Requestor's Name)		
(Address)		
(/ (dd/e33)		
(Address)		
(City/State/Zip/Phone #		
(City) State/21p/FNOHE #)	
PICK-UP WAIT	MAIL	
(Business Entity Name)		
(Document Number)		
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Certified Copies Certificates of	Status	
Special Instructions to Filing Officer.		





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COVER LETTER

Division of Corporations		
SUBJECT: Atticama Resources International, Inc. Name of Corporation		
DOCUMENT NUMBER: P12000082008		
The enclosed Statement of Change of Registered (Office/Agent and fee are submitted for filing	
Please return all correspondence concerning this m		
Daniel Finch		
Name of Contact Person		
Atacama Resources International		
Firm/Company	·· ·-·	
1317 Edgewater Dr. Suite 2510		
Address		
Orlando, FL 32864		
City/State and Zip Code	**************************************	
finchdameltech'a gmail com		
Esmail address: (to be used for future annual re	eport notification)	
For further information concerning this matter, plea	ase call:	
Daniel Finch	- in	
Name of Contact Person	Area Code & Daytime Telephone Number	
Enclosed is a \$35.00 check made payable to the De	ase call: at (214 755-0932 28 28 28 29 29 29 29 2	
Mailing Address:	Street Address:	
Amendment Section	Amendment Section	
Division of Corporations	Division of Corporations	
P.O. Box 6327 The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

CR21 045 (64-13)

Tallahassee, FL 32314

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607,0502, 617,05 statement of change is submitted for a corporation orga in order to change its registered office or regis	inized under the laws of the State of Florida
1. The name of the corporation: Atacama Resources Inte	
2. The principal office address: 1317 Edgewater Dr. Suite	2.2516, Orlando, 11, 32804
3. The mailing address (if different)	
4. Date of incorporation/qualification: January 9, 2015	_ Document number: P13000052008
5. The name and street address of the current registered Florida Department of State: (If resigned, enter resign	agent and registered office on file with the
Resigned	
6. The name and street address of the new registered ag (if changed);	ent (if changed) and or registered office
Physical Address.com , CC	
	2023
1317 Edgewater Dr., Orlando, FL 32804	ev NOI acceptable 2023 JUL 2
The street address of its registered office and the stree as changed will be identical.	∞ taddress of the business office of its regisfered agent.
Such change was authorized by resolution duly adopte authorized by the bourd, or the corporation has been n	ed by its board of directors or by an officer so of the change.
Simular of the or director	Daniel Finch, COO Printel of typed name and title
I hereby accept the appointment as registered agent a I harther agree to comply with the provisions of all sta of my duties, and I am familiar with and accept the ob- document is being filed merely to reflect a change in t corporation has been notified in writing of this change	nd agree to act in this capacity, itutes relative to the proper and complete performance digation of my position as registered agent. Or, if this he registered office address.) hereby confirm th at the e.
S. Garant granting Street Agent	3/25-2023
Signature grant quent	Date
If signing on behalf of an entity:	
Calcifer P Gardner Toped or Printed Name	

* * * FILING FEE: \$35,00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE, MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSFE, FL 32314 CR2E045 (04/13)