P18000067908

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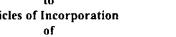
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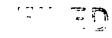
TO: Amendment Section Division of Corporations

NAME OF CORPORA	ATION:AT	las fifty two		
DOCUMENT NUMBE	er: <u>P18</u>	000067908	·	
The enclosed Articles of	f Amendment and fee are su	bmitted for filing.		
Please return all corresp	ondence concerning this ma	tter to the following:		
	S	alvador Cueves		
_		Name of Contact Person	1	
		ATIGO PIFTY Tu	io	
		Firm/ Company	<u> </u>	
	7948	• -	#361	
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Tackson ville Buch 32250 City/ State and Zip Code			32256	
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E-mail address: (to be used for future annual report notification)			notification)	
For further information	concerning this matter, plea	se call:		
Salvadu	Cucyss	at (773) 255-0703	
Name of Contact Person		at (773) 255 -0703 Area Code & Daytime Telephone Number		
Enclosed is a check for	the following amount made	payable to the Florida Dep	artment of State:	
\$35 Filing Fee	\$43.75 Filing Fee & Certificate of Status	S43.75 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		Ameno Divisio The C	Address Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation





ATlas	fifty-two	. Inc.	2020 =	20 רדי	PH 5: 58
(Name of Corporation :			pt. of State)		
ે 18	3000067908	?			
	Number of Corporation				
Pursuant to the provisions of section 607.1006, Florida States Articles of Incorporation:	atutes, this <i>Florida Pro</i>	ofit Corporation	adopts the follow	ing amer	ndment(s) to
A. If amending name, enter the new name of the corpo	oration:				
				TI	
name must be distinguishable and contain the word "corpo" lnc.," or Co.," or the designation "Corp," "Inc.," or "chartered," "professional association," or the abbrevia	r "Co". A profession				orp.,"
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRE	<u></u>				_
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			14 Two 15t. #3 16 Beach 3		
D. If amending the registered agent and/or registered	office address in Flor			<i>VL)</i> 0	
new registered agent and/or the new registered offi	ce address:				
Name of New Registered Agent					
	(Florida street address)				
New Registered Office Address:	(Citv)		, Florida	ip Code)	_
	(0.5)		,,,,,	r done,	
New Registered Agent's Signature, if changing Registe					
I hereby accept the appointment as registered agent. I ar	n familiar with and acc	cept the obligation	ons of the position	7.	
Signatur	e of New Registered Ag	gent, if changing	,		

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 Doc	
X Remove	<u>v</u>	Mike Jones	
X Add	<u>sv</u>	Sally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	Address
1) Change	<u></u>	Luis Rodriguez	459 appaloosa Au
Add		G .	St. Agustine, FL 32095
Remove			
2) Change			
Add			
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
5) Change			
Add			
Remove			
6) Change			
Add			
_ Remove			

an amendment provides for an exchange, reclassification rovisions for implementing the amendment if not contain (if not applicable, indicate N/A)	
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(if not applicable, indicate N/A)	or cancellation of issued shares,
(ij noi applicaole, inalcale N/A)	ed in the amendment itself:
	
	

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. The date of each ame date this document wa	endment(s) adoption:	12/31/2019	, if other than the
Effective date <u>if appl</u>	-	1/01/2020	nent file date)
	(n	no more than 90'days after amendn	nent file date)
	erted in this block does not r date on the Department of Sta		g requirements, this date will not be listed as the
Adoption of Amendn	nent(s) (CHEC	CK ONE)	
☐ The amendment(s) action was not requ		corporators, or board of directors w	ithout shareholder action and shareholder
The amendment(s) by the shareholder	was/were adopted by the shars was/were sufficient for app	areholders. The number of votes can	ast for the amendment(s)
		hareholders through voting groups. oup entitled to vote separately on t	
"The number	of votes east for the amendu	nent(s) was/were sufficient for app	roval
by		group)	.,,
	(voting	group)	
Date	ed/2/31/26 1 ?	5	
¢:		P 3	
Sigr	(By a director, presider	nt or other officer – if directors or corrector – if in the hands of a receive	
		Sqlvsder Cueves ped or printed name of person sign	
	(Тур	ped or printed name of person sign	ing)
		President	
	(Tit	le of person signing)	