P18000070404

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

Office Use Only



300331626423

07/08/19--01007--038 **35.00

S TALLENT JUL 1 8 2019



pmend

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORP	ORATION: ATLAS EXPOS IS	NC.	
DOCUMENT NU	MBER: P18000070404		
	les of Amendment and fee are su	bmitted for filing.	
Please return all co	rrespondence concerning this ma	tter to the following:	
	INNA ERLIKH		
		Name of Contact Person	1
	CORONA TAX SERVICES		
		Firm/ Company	
	3800 S OCEAN DR		
		Address	
	HOLLYWOOD, FL 33919		
		City/ State and Zip Cod	e
IN	JFO@CORONATAXUSA.COM		. /
	~	sed for future annual report	notification)
For further informa	ition concerning this matter, pleas	se call:	
INNA ERLIKH		954 at (de & Daytime Telephone Number
Nar	ne of Contact Person	Area Co	de & Daytime Telephone Number
Enclosed is a cheek	c for the following amount made	payable to the Florida Depa	artment of State:
S35 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 Tallahassec, FL 32314		Ameno Divisio Clifton	Address Iment Section on of Corporations a Building Executive Center Circle

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

ATLAS EXPOS INC		
(Name of Corporati	on as currently filed with the Florida I	Dept. of State)
P18000070404		
(Docur	ment Number of Corporation (if known)	
Pursuant to the provisions of section 607.1006. Florid its Articles of Incorporation:	a Statutes, this <i>Florida Profit Corporatio</i>	m adopts the following amendment(s) to
A. If amending name, enter the new name of the co	orporation:	
		The new
name must be distinguishable and contain the wor "Corp.," "Inc.," or Co.," or the designation "Corp. word "chartered," "professional association," or the	o," "Inc," or "Co". A professional cor	orporated" or the abbreviation poration name must contain the
B. Enter new principal office address, if applicable		
(Principal office address <u>MUST BE A STREET ADI</u>	<u>ORESS</u>)	
	···	0
C. Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u></u>	
		TE TE
D. If amending the registered agent and/or registered new registered agent and/or the new registered		name of the
Name of New Registered Agent		
	(Florida street address)	
New Registered Office Address:		Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.		uions 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)

Remove

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.

Example:	., काम उपा	ij Smith, Or as	an saa		
X Change	<u>PT</u>	John Doe			
X Remove	\underline{V}	Mike Jones			
X Add	<u>sv</u>	Sally Smith			
Type of Action (Check One)	<u>Title</u>	<u>Nan</u>	<u>re</u>		<u>Addres</u> s
1) Change	VP	AN	NA ANUCHINA		3300 NE 191ST ST#PH4
X Add					AVENTURA, FLORIDA
Remove					33180
2) Change	VP	GU	STAVO ESCOBAR		9439 SW 162ND ST
X Add					MIAMI, FLORIDA
Remove				-	33196
3) Change					
Add				_	
Remove					
4) Change					
Add					
Remove					
5) Change					
_					
Add				-	
Remove				,	
6) Change					
Add					

	ry). (Be specific)			
				
	-			
				-
If an amendment provides for an	exchange reclassific	ation or cancellation	of issued shares.	
provisions for implementing the	amendment if not co	ntained in the amend	ment itself:	
, , , , , , , , , , , , , , , , , , , ,	4)			
(if not applicable, indicate N/:				
(if not applicable, indicate N/:				
(if not applicable, indicale N/				•
(if not applicable, indicale N/:				
(if not applicable, indicale N/:				
(if not applicable, indicale N/				
(if not applicable, indicale N/				
(if not applicable, indicale N/:				
(if not applicable, indicale N/:				
(ij not applicable, indicale N/:				
(ij not applicable, indicale N/				
(ij not applicable, indicale N/:				
(if not applicable, indicale N/				

The date of each amendment(s) a date this document was signed.	doption:, if other than the
Effective date if applicable:	
rifective date <u>n appircame</u> .	(no more than 90 days after amendment file date)
Note: If the date inserted in this document's effective date on the D	block does not meet the applicable statutory filing requirements, this date will not be listed as the epartment of State's records.
Adoption of Amendment(s)	(<u>CHECK ONE</u>)
■ The amendment(s) was/were ad by the shareholders was/were so	opted by the shareholders. The number of votes cast for the amendment(s) ufficient for approval.
	proved by the shareholders through voting groups. The following statement reach voting group entitled to vote separately on the amendment(s):
	for the amendment(s) was/were sufficient for approval
by	(voting group)
	(voting group)
☐ The amendment(s) was/were ad action was not required.	opted by the board of directors without shareholder action and shareholder
☐ The amendment(s) was/were ad action was not required.	opted by the incorporators without shareholder action and shareholder
7/5/2019 Dated	
Date u	
Signature	PV
(By a	drector, president or other officer – if directors or officers have not been
	ed, by an incorporator – if in the hands of a receiver, trustee, or other court inted fiduciary by that fiduciary)
	Ogniel Zeldich (Typed or printed name of person signing)
	(Typed or printed name of person signing)
	(Title of person signing)