## P190000 50615

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## COVER LETTER

**TO:** Amendment Section Division of Corporations

NAME OF CORPO	RATION: AATS OF FLORII	DA CORP			
DOCUMENT NUMBER: P19000050615					
The enclosed Articles of Amendment and fee are submitted for filing.					
Please return all corre	espondence concerning this ma	tter to the following:			
	ODALYS PARRA				
	Name of Contact Person				
	AATS OF FLORIDA CORP				
		Firm/ Company			
	1275 WEST 47TH PLACE SUITE 105				
	Address				
	HIALEAH, FLORIDA 33012				
City/ State and Zip Code					
odal	ys@aatsparra.com				
	. •	sed for future annual report	notification)		
	12 111111 404-4201 (10 102 10		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
For further information	on concerning this matter, pleas	se call:			
ODALYS PARRA		at (	501-2405		
Name	of Contact Person	at ( Area Co	) de & Daytime Telephone Number		
Enclosed is a check f	or the following amount made p	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)	☐S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
<u>M2</u>	uling Address	Street	Address		
Amendment Section		Amendment Section			
	Division of Corporations  Division of Corporations  Division of Corporations				
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

## Articles of Amendment Articles of Incorporation

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AATS OF FLORIDA CORP	of 🔂		
AATS OF FLORIDA CORP	The second secon		
(Name of Corporation as curren	tly filed with the Florida Dept. of State)		
P19000050615	$\ddot{\omega}$		
(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.1006, Florida Statutes, this its Articles of Incorporation:	s Florida Profit Corporation adopts the following amendment(s)		
A. If amending name, enter the new name of the corporation:			
name must be distinguishable and contain the word "corporati "Corp." "Inc.," or Co.," or the designation "Corp." "Inc." or word "chartered," "professional association," or the abbreviation	"Co". A professional corporation name must contain the		
B. Enter new principal office address, if applicable:	5880 WEST 20TH AVE		
(Principal office address <u>MUST BE A STREET ADDRESS</u> )	HIALEAH, FLORIDA 33016		
C. Enter new mailing address, if applicable:	1275 WEST 47TH PLACE SUITE 105		
(Mailing address <u>MAY BE A POST OFFICE BOX</u> )	HILAEAH, FLORIDA 33012		
D. If amending the registered agent and/or registered office addressed registered agent and/or the new registered office addressed of New Registered Agent			
Name of New Registered Agent	<u></u>		
Name of New Registered Agent  Name of New Registered Agent			

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)

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

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

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 Doc, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add

Example: X Change	$\underline{PT}$	John Doe		
X Remove	<u>V</u>	Mike Jones		
<u>X</u> Add	<u>SV</u>	Sally Smith		
Type of Action (Check One)	Title	<u>Name</u>	Address	
1) Change	Р	FRANCO ORTIZ. ROSA	1275 W 47TH PL SUITE 105	
Add			HIALEAH, FL 33012	
X Remove				
2) X Change	P	PARRA, ODALYS	1275 W 47TH PL SUITE 105	
Add			HIALEAH, FL 33012	
Remove				
3 ) Change	VP	PARRA, MARIO JAIME	1275 W 47TH PL SUITE 105	
X Add			HIALEAH, FL 33012	
Remove				
4) Change				
Add				
Remove				
5) Change				
Add				
Remove				
6) Change				
Add				
Remove				

E. <u>If amending</u> (Attach addia PLEASE UPD:	or adding additional a tional sheets, if necessar ATE	Articles, enter chan y). (Be specific)	ige(s) here:			
****		<u> </u>	<u>.                                    </u>		···	
EIN Number: 8	4-3109789			· <del>-</del>		
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					· · · · · · · · · · · · · · · · · · ·	
F. <u>If an amend</u>	lment provides for an e	Achange, reclassific	cation, or cancell	ation of issued sh	ares,	
<u>provisions</u> ( <i>if not</i> :	for implementing the a applicable, indicate N/A	<u>mendment if not co</u> )	ontained in the a	mendment itself:		
N/A						
		<del>- "</del>				
						· · · · · ·

	tion: $\frac{3}{2}i/(\frac{i}{1})i\frac{\epsilon_1}{2}$	, if other than the
The date of each amendment(s) adopt date this document was signed.	tion:	, it when that the
08/01/2	010	
Effective date if applicable:	(no more than 90 days after ame)	ndment file date)
Note: If the date inserted in this bloc document's effective date on the Depar	k does not meet the applicable statutory fil tment of State's records	ing requirements, this date will not be listed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )	
The amendment(s) was/were adopte by the shareholders was/were suffice	d by the shareholders. The number of votes ient for approval.	east for the amendment(s)
☐ The amendment(s) was/were approximast be separately provided for each	red by the shareholders through voting group th voting group entitled to vote separately of	ns. The following statement in the amendment(s):
"The number of votes east for	the amendment(s) was/were sufficient for a	pproval
by	(voting group)	<u>.</u>
-	(voting group)	
☐ The amendment(s) was/were adopte action was not required.	d by the board of directors without sharehol	der action and shareholder
☐ The amendment(s) was/were adopte action was not required.	d by the incorporators without shareholder	action and shareholder
10/22/2019		
Dated		
Signature		
selected, I	ctor, president or other officer – if directors by an incorporator – if in the hands of a rece fiduciary by that fiduciary)	or officers have not been iver, trustee, or other court
0	DALYS PARRA	
_	(Typed or printed name of person s	igning)
pj	RESIDENT	
	(Title of person signing	:1