P22000026136

	<u>}</u>
(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone	#)
PICK-UP WAIT	MAIL
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPORATION: ATOZ	CASA INC	
DOCUMENT NUMBER: P22000026	36	
The enclosed Articles of Amendment an		
Please return all correspondence concern	ing this matter to the following:	
EFRAIM LOPEZ		
	Name of Contact Person	
LOPEZ SANCHE	Z ACCOUNTING CORP	
	Firm/ Company	
6900 TAVISTOC	K LAKES BLVD, STE 400	
	Address	
ORLANDO		
	City/ State and Zip Code	
FL. 32827		
E-mail addre	s: (to be used for future annual report notification)	
For further information concerning this r	natter, please call:	, <u>1</u> 200
JOSE CHACON	at ()	()
Name of Contact Person	Area Code & Daytime Telephone Number	<u>-</u> 8
Enclosed is a check for the following am	ount made payable to the Florida Department of State:	· · · · ·
S35 Filing Fee	· ·	. 1 문. (2) (3)
Mailing Address Amendment Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Street Address Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

Articles of Amendment to Articles of Incorporation of

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	of Corporation as currently	filed with the Florida Dept. of State	2)		
P22000026136	-				
	(Document Number of	Corporation (if known)			
Pursuant to the provisions of section 607 its Articles of Incorporation:	.1006, Florida Statutes, this I	Florida Profit Corporation adopts the	followin	g amendmo	ent(s)
A. If amending name, enter the new n	ame of the corporation:				
N/A					
name must he distinguishable and contain "Inc.," or Co.," or the designation " "chartered," "professional association,	Corp." "Inc," or "Co". A	ompany," or "incorporated" or the abi professional corporation name must	breviatio Contail	_The new on "Corp.," n the word	
3. Enter new principal office address	if applicable:	3065 DANIELS ROAD #1144			
Principal office address <u>MUST BE A</u> \$		WINTER GARDEN, FL 34787			
			-		
C. Enter new mailing address, if appl (Mailing address MAY BE A POST		3065 DANIELS ROAD #1144			
		WINTER GARDEN, FL 34787			
				(=)	
). If amending the registered agent an new registered agent and/or the new	id/or registered office address:	ess in Florida, enter the name of the	•	()	·
Name of New Registered Agent	N/A		·	\odot	•
	N/A			1.4	
	(Florida stree	t address)		. (၇	,
New Registered Office Address	N/A		1 1	4- , LO	
New Registered Office Address.		, Florida City)	(Zip C	 'ode)	
ew Registered Agent's Signature, if	nanging Registered Agent:				
hereby accept the appointment as regist	erea agent. Tam jamutar wi	m and accept the obugations of the po.	stion.		
	Signature of New Reg	istered Agent, if changing			
heck if applicable					
The amendment(s) is/are being filed pe	rsuant to s 607.0120 (11) (e), 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)

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: X Change	<u>PT</u>	<u>John</u>	Doe	
X Remove	<u>V</u>	Mike	Jones	
X Add	<u>sv</u>	Sally	<u>Smith</u>	
Type of Action (Check One)	<u>Title</u>		<u>Name</u>	Address
1) Change				
Add				
Remove				
2) Change		_		
Add				
Remove 3) Change				
Add				
Remove				
4) Change		_		
Add				
Remove				
5) Change		_		
Add				<u> </u>
Remove				
6) Change				
Add		_		
Remove				
		- 1		

Attach additional sheets, if nece.	ssary). (Be specific)
\	
	
	
	
<u>.</u>	
If an amendment provides for a	an exchange, reclassification, or cancellation of issued shares, he amendment if not contained in the amendment itself:
(if not applicable, indicate i	he amendment if not contained in the amendment itself:
	(VA)
/A	

	09/25/2022	
The date of each amendment(s) adop date this document was signed.	tion:	_, if other than the
09/22/2 Effective date <u>if applicable</u> :		
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this block document's effective date on the Depart	does not meet the applicable statutory filing requirements, this date will truent of State's records.	not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adopte action was not required.	d by the incorporators, or board of directors without shareholder action and s	shareholder
☐ The amendment(s) was/were adopte by the shareholders was/were suffic	d by the shareholders. The number of votes cast for the amendment(s) ient for approval.	
	by the shareholders through voting groups. The following statement woting group entitled to vote separately on the amendment(s):	
"The number of votes cast for	the amendment(s) was/were sufficient for approval	
by		
	(voting group)	
09/25/2022 Dated		
	or, president or other officer – if directors or officers have not been	_
	y an incorporator – if in the hands of a receiver, trustee, or other court inductory by that fiductory)	
Of	SECHACON	
_	(Typed or printed name of person signing)	
þ		
	(Title of person signing)	