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(((H23000073930 3)))



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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : SORSHER & ASSOCIATES, LLC.

Account Number : 120170000056 Phone : (954)842-2931

Fax Number (954)842-2936

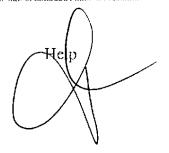
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## COR AMND/RESTATE/CORRECT OR O/D RESIGN ATLANTIC MIAMI INTERNATIONAL, INC.

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## COVER LETTER

TO: Amendment Section Division of Corporations

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NAME OF CORPO	DRATION: ATLANTIC MIAM	MI INTERNATIONAL, IN	c.		
DOCUMENT NUN	1BER: P23000005210				
The enclosed A <i>rticle</i>	s of Amendment and fee are su	bmitted for filing			
Please return all corr	espondence concerning this ma	tter to the following:			
	FOMIN, OLEKSANDR				
	Name of Contact Person				22
	ATLANTIC MIAMI INTER			!	J231
		Firm/ Company		<del></del> -	33.4
	500 THREE ISLANDS BLV	• •		T.	22
	Address				
	HALLANDALE BEACH, FL 33009			.0.7	宝
City/ State and Zip Code				, 0.38	
					ັພ
	faarmada 10@gmail.com		~ <del></del>		
	E-mail address: (to be us	sed for future annual report	notification)		
For further informati	ion concerning this matter, plea	se call:			
FOMIN, OLEKSA.	NDR	at ( 305	965-7363 de & Daytime Telephone Nus		
Name	e of Contact Person	Area Co	de & Daytime Telephone Nun	прег	
Enclosed is a check	for the following amount made	payable to the Florida Dep	artment of State:		
S35 Filling Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 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 2415 1	Address  Iment Section on of Corporations entre of Tallahassee N. Monroe Street, Suite 810 assee, FL 32303	)	

## Articles of Amendment to Articles of Incorporation of

ATLANTIC MIAMI INTERNATIONAL, INC.

(Name of Corporation as currently filed with the	Florida Dept. of State)
23000005210	
(Document Number of Corporation (it	known)
ursuant to the provisions of section 607.1006, Florida Statutes, this <i>Florida Profit C</i> s Articles of Incorporation:	orporation adopts the following amendment(s
. If amending name, enter the new name of the corporation:	
ame must be distinguishable and contain the word "corporation," "company," or "inc." or Co.," or the designation "Corp," "Inc," or "Co". A professional contacted," "professional association," or the abbreviation "P.A."  Enter new principal office address, if applicable: Principal office address MUST BE A STREET ADDRESS)	ncorporated" or the abbreviation Borp. " porporation name must contain the word of the North Research
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address in Florida,	enter the name of the
new registered agent and/or the new registered office address:	
Name of New Registered Agent	
(Florida street address)	
New Registered Office Address: (City)	, Florida (Zip Code)
ew Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent. I am familiar with and accept to	the obligations of the position.
Signature of New Registered Agent,	ic t

The amendment(s) is/are being filed pursuant 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>	John Doe	
$\underline{X}$ Remove	<u>V</u>	Mike Jones	
<u>X</u> Add	_ <u>sv</u>	Sally Smith	
Type of Action (Check One)	Title	Name	<u>Addres</u> s
1) Change	VP	FOMIN, VADIM	500 THREE ISLANDS BLVD., ST
Add			HALLANDALE BEACH, FL 330
X Remove			123
2) Change	VP	FOMIN, VADYM	500 THREE ISLANDS BLVE, ST
X Add			HALLANDALE BEACH, FE-3301
Remove 3) Change			
Add			
Remove			
4) Change			
Add			
Remove			
3) Change			
Adri			
Remove			
(i) Change		_	
Add			
Remove			

The date of each amendment(s) as	nption:	, if other than the
date this document was signed.		
Effective date if applicable:	(no more than 90 days after amendment file date)	
	(no more than 90 days after amenament file date)	
Note: If the date inserted in this bedocument's effective date on the De	ock does not meet the applicable statutory filing requirements, this coartment of State's records.	date will not be listed as the
Adoption of Amendment(s)	(CHECK ONE)	
■ The amendment(s) was/were add action was not required.	pted by the incorporators, or board of directors without shareholder ac	tion and shareholder
☐ The amendment(s) was/were add by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendmen ficient for approval.	2023 FEB 27
	roved by the shareholders through voting groups. The following states each voting group entitled to vote separately on the amendment(s):	
"The number of votes cast	or the amendment(s) was/were sufficient for approval	AM 8: 03
by	<u> </u>	
	(voting group)	' ;= ω
02/14/2023 Dated		
Signature	Oleksandr Fomin	
(By a di selected	rector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other conditionally by that fiduciary)	
	FOMIN, OLEKSANDR	
	(Typed or printed name of person signing)	
	PRESIDENT	
	(Title of person signing)	