(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
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(Do	cument Number)	1
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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JUN 27 S. PRATHER

## COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: ATLANTIX DESI	GN CORP			
	BER: P23000019953				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corre	espondence concerning this ma	tter to the following:			
	YORDAN CRUZ				
		Name of Contact Persor	1		
		Firm: Company			
	6910 W 3RD AVE				
		Address			
	HIALEAH, FL 33014	City' State and Zip Code	•		
	CHAANAHCRUZ@YAHO				
		sed for future annual report	notification)		
For further information	on concerning this matter, pleas	se call:			
YORDAN CRUZ		at ( <sup>3</sup> 05	, 322-1322		
Name	of Contact Person	Area Co	) 322-1322 de & Daytime Telephone Number		
Enclosed is a check f	or the following amount made	payable to the Florida Depa	ulment 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)		
An Div P.C	niling Address nendment Section distance of Corporations 1. Box 6327 lahassee, FL 32314	Amend Divisio The C 2415 ?	Address Iment Section on of Corporations entre of Tallahassee 8, Monroe Street, Suite 810 issee, FL 32303		

## Articles of Amendment Articles of Incorporation οf

## ATLANTIX DESIGN CORP (Name of Corporation as currently filed with the Florida Dept. of State) P23000019953

nt(s) to

A. If amending name, enter the new name of the	earnoration:	
ATLANTIX DESIGN & MEDICAL SERVICES CO		
name must be distinguishable and contain the word " "Inc.," or Co.," or the designation "Corp.," "Inc "chartered," "professional association," or the abb	corporation," "company," or "meor ;" or "Co". A professional corp	The new porated or the abbreviation (Corp., pration name must contain the wor
B. <u>Enter new principal office address, if applicab</u> (Principal office address <u>MUST BE A STREET AL</u>		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE B</u>	(OX)	
D. If amending the registered agent and/or regist new registered agent and/or the new registered Name of New Registered Agent	d office address:	
new registered agent and/or the new registered	d office address:	
new registered agent and/or the new registered	d office address:	
new registered agent and/or the new registered	d office address:  (Florida street address)	. Florida
new registered agent and/or the new registered  Name of New Registered Agent	d office address:  (Florida street address)	···

Check if applicable

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)

Example:

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

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, Saily Smith is named the V and S. These should be noted as John Doe, PT us a Change Mike Jones, V as Remove, and Saily Smith, SV as an Add

<u>X</u> Change	PT	<u>John Doe</u>	
X Remove	<u>V</u>	Mike Jones	
X Add	<u>8V</u>	Sally Smith	
Type of Action (Check One)	Tale	Name	Address
1) Change			
Add			
Remove			
2) Change			
Add			
Remove 3 ) Change			
Add			
Remove			
4)Change			
Add			
Remove			
5) Change			<del></del>
Add			
Remove			
6) Change			
Add			
Remove			

Attach <i>addition</i>	al sheets, it nece:	n <mark>ał Articles, enter</mark> ssary) – (Be speci				
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<u>f an amendme</u>	nt provides for	an exchange, recl he amendment if	assification, or c	ancellation of iss	ued shares.	
(it not app	dicable, indicate	Ned)	noc contained in	tue ajugutuent	nsen.	
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	· <del>···</del>		<del></del>			<del></del>
		_ <del></del>				

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The date of each amendment(s date this document was signed.	) adoption:	, if other	than the
Effective date <u>it ap</u> plicable:			
<u></u>	(no more than 90 days after amendment file date)		
Note: If the date inserted in the document's effective date on the	s block does not meet the applicable statutory filing requirements, this date will r Department of State's records.	ot be list	ed as the
Adoption of Amendment(s)	( <u>CHECK ONE</u> )		
The amendment(s) was were action was not required.	adopted by the incorporators, or board of directors without shareholder action and $s$	hatcholde	ı
■ The amendment(s) was were by the shareholders was were	adopted by the shareholders. The number of votes east for the amendment(s) sufficient for approval.		
	approved by the shareholders through voting groups. The following statement for each voting group entitled to vote separately on the amendmentis).		
"The number of votes c	ast for the amendment(s) was were sufficient for approval		~2
by		<u> </u>	02 <b>↓</b>
	(voting group)		
Dated_05 10/20	124	1 1 2 1 1 1 1 1	2024 MAY 2.1
Signature	15	11. 10.	船 7:
(By sele	a director, president or other officer - if directors or officers have not been cted, by an incorporator - if in the hands of a receiver, trustee, or other court binted (iduciary by that tiduciary)		=
	YORDAN CRUZ		
	(Typed or printed name of person signing)		
	PRESIDENT		
	(Title of person signing)		