Division of Corporations Electronic Filing Cover Sheet

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(((H24000212227 3)))



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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : MORERA LAW GROUP, P.A.

Account Number : I20220000121 Phone : (786)789-4546 Fax Number : (786)646-2402

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

| Email | Address: | Austingomezesq@outlook.com | |
|-------|----------|----------------------------|--|
| | | | |

COR AMND/RESTATE/CORRECT OR O/D RESIGN ATG LAW, P.A.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 05 |
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Electronic Filing Menu Corporate Filing Menu

From: Bryan Morera

Fax: 17866462402

To

Fax: (850) 617-6380

Page: 2 of 6

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COVER LETTER

| TO: Amendment Sect Division of Corpo | | | |
|--|---|--|--|
| NAME OF CORPOR | RATION: ATG LAW, P.A. | | |
| DOCUMENT NUMI | | | · |
| The enclosed Articles | of Amendment and fee are su | bmitted for filing. | |
| Please return all corres | spondence concerning this ma | tter to the following: | |
| | Austin Gomez | | |
| | | Name of Contact Person | |
| | ATG Law, P.A. | | |
| | | Firm/ Company | |
| | 7230 N OAKMONT DRIVE | , , | |
| | | Address | |
| | HIALEAH, FL 33015 | | |
| | | City/ State and Zip Code | : |
| | austingomezesq@outlook.com | m | |
| | E-mail address: (to be us | ed for future annual report | notification) |
| For further information | n concerning this matter, pleas | se call: | |
| Austin T. Gomez | | at (| 753-3124 |
| Name o | of Contact Person | Area Coo | de & Daytime Telephone Number |
| Enclosed is a check fo | r the following amount made p | payable to the Florida Depa | rtment of State: |
| S35 Filing Fee | S43.75 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 | | Amend Divisio The Ce 2415 N | Address ment Section n of Corporations entre of Tallahassee J. Monroe Street, Suite 810 ssee, FL 32303 |

Articles of Amendment to Articles of Incorporation of

| ATG LAW, P.A. | |
|---|---|
| (Name of Corporation as current) | y filed with the Florida Dept. of State) |
| P23000067604 | |
| (Document Number of | f Corporation (if known) |
| Pursuant to the provisions of section 607.1006. Florida Statutes, this aits Articles of Incorporation: | Florida Profit Corporation adopts the following amendment(s) to |
| A. If amending name, enter the new name of the corporation: | |
| name must be distinguishable and contain the word "corporation," "C" "Inc.," or Co.," or the designation "Corp," "Inc," or "Co". A | professional corporation name must contain the word |
| "chartered," "professional association," or the abbreviation "P.A." | 7900 Oak Lane #400 |
| B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | Miami Lakes, FL 33016 |
| | |
| C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | · |
| D. If amending the registered agent and/or registered office addr | ress in Florida, enter the name of the |
| new registered agent and/or the new registered office address | |
| Name of New Registered Agent | |
| (Florida str | and addressed |
| (riorua sir | eet (duiress) |
| New Registered Office Address: | , Florida (Zip Code) |
| | |
| New Registered Agent's Signature, if changing Registered Agents I hereby accept the appointment as registered agent. I am familiar v | i with and accept the obligations of the position. |
| Signature of New Ri | egistered Agent, if changing |
| Check if applicable ☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (11) | (e), F.S. |

From: Bryan Morera

Fax: 17866452402 To: • Fax: (850) 617-6380 Page: 4 of 6

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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.

| X Change | <u>PT</u> | John Do | <u>c</u> | |
|-------------------------------|-----------|----------|-------------|---------|
| X Remove | <u>v</u> | Mike Jos | nes | |
| _X Add | <u>sv</u> | Sally Sn | <u>iith</u> | |
| Type of Action (Check One) | Title | | Name | Address |
| l) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 2) Change | | _ | | |
| | | | | |
| Remove 3) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 4) Change | | | | |
| Add | | | | |
| Remove | | | | |
| 5) Change | | _ | | |
| Add | | | | |
| Remove | | | | |
| 6) Change | | | | |
| Add | | | | |
| Remove | | | | |

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| If amending or adding additional Arti Attach additional sheets, if necessary). | (Be specific) | |
|--|--|--------|
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| If an amendment provides for an exch provisions for implementing the ame (if not applicable, indicate N/A) | ange, reclassification, or cancellation of issued sl ndment if not contained in the amendment itself: | anres, |
| | | |
| | | |
| | | |
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| | | |

From: Bryan Morera Fax: 17866462402 To: Fax: (850) 617-6380 Page: 6 of 6 06/18/2024 4:20 PM

| The date of each amendment(s date this document was signed. |) adoption: | , if other than the |
|--|--|------------------------------|
| Effective date if applicable: | (no more than 90 days after amendment file date) | |
| Note: If the date inserted in thi document's effective date on the | s block does not meet the applicable statutory filing requirement | |
| 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 shareho | older action and shareholder |
| ☐ The amendment(s) was/were by the shareholders was/were | adopted by the shareholders. The number of votes east for the ame sufficient for approval. | endment(s) |
| | approved by the shareholders through voting groups. The followin for each voting group entitled to vote separately on the amendmen | |
| "The number of votes c | ast for the amendment(s) was/were sufficient for approval | |
| by | (voting group) | |
| | | |
| 6/18/202 Dated | <u> </u> | |
| Signature | Austin Jomez a director, president or other officer - if threctors of officers have | |
| sele | a director, president or other officer - if threctors of officers have a cted, by an incorporator if in the hands of a receiver, trustee, or obinted fiduciary by that fiduciary) | |
| | Austin T. Gomez | |
| | (Typed or printed name of person signing) | ··· |
| | President | |
| | (Title of person signing) | |