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SECRETARY OF STATE TALLAHASSEE, FLORIDA

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JUN 1 9 2018

I ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPOR	RATION: A.T.L., INC			
DOCUMENT NUMI	BER: P94000088210			
	of Amendment and fee are su	ibmitted for filing.		
Please return all corre	spondence concerning this ma	itter to the following:		
	KIM MCENTIRE			
		Name of Contact Person	n	
	ATL INC			
		Firm/ Company	· <u></u>	
	3787 H8TH AVE N			
		Address		
	CLEARWATER, FL 33762			
		City/ State and Zip Cod	e	
KIM	@ATLFLORIDA.COM			
		sed for future annual report	notification)	
For further information	reoncerning this matter, pleas	se call:		
KIM MCENTIRE		at (572-8841	
Name o	of Contact Person	Area Co	de & Daytime Telephone Number	
Enclosed is a check fo	r the following amount made	payable to the Florida Depa	ertment of State:	
■ \$35 Filing Fee	□\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	☐\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327 Tallahassec, FL 32314		Street Address Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle		

Tallahassee, FL 32301

Articles of Amendment to Articles of Incorporation of

(Name of	Corporation as curren	tly filed with the Florida Dept	, of State)	
P94000088210				
	(Document Number	of Corporation (if known)		
Pursuant to the provisions of section 607.10 its Articles of Incorporation:	06, Florida Statutes, thi	s Florida Profit Corporation ac	lopts the following an	rendment(s) to
A. If amending name, enter the new nam	e of the corporation:			
NA			The	, new
name must be distinguishable and contai "Corp.," "Inc.," or Co.," or the designat word "chartered," "professional associatio	ion "Corp," "Inc." or	"Co". A professional corpora "P.A."		
B. <u>Enter new principal office address, if</u> (Principal office address <u>MUST BE A STR</u>		NA		
C. Enter new mailing address, if applicable: (Mailing address <u>MAY BE A POST OFFICE BOX</u>)		NA	m _o .	FILE
D. If amending the registered agent and/ new registered agent and/or the new r			L0 5-	<u> </u>
Name of New Registered Agent	IM MCENTIRE			
	787 118TH AVE N			
_	(Florida s	treet address)		
New Registered Office Address:	LEARWATER		. Florida 33762	
		(City)	(Zip Code	,

New Registered Agent's Signature, if changing Registered Agent:

Thereby accept the appointment as registered agent. Tam familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

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 F 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> <u>Je</u>	<u>ohn Doe</u>	
X Remove	<u>V</u> <u>N</u>	fike Jones	
<u>X</u> Add	<u>sv</u> <u>s</u>	ally Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) X Change	VD	ADAMS, FRANK M	3787 118TH AVE N
Add			CLEARWATER, FL 33764
Remove			
2) X Change	PD	TWISS, CASEY T	3787 H8TH AVE N
Add			CLEARWATER, FL 33764
Remove			
3) Change	S	SCHLIPF, BARBARA J	6116 52ND AVE N
Add			ST PETERSBURG, FL 33709
X Remove			
4) Change	DT	BLEDSOE, ROBERT P	3787 118TH AVE N
Add			CLEARWATER, FL 33764
X Remove			
5) Change	VĐ	BOLT, JOHN D	3787 118TH AVE N
X Add			CLEARWATER, FL 33764
Remove			
6) Change	STD	MCENTIRE, KIM	3787 118TH AVE N
X Add			CLEARWATER, FL 33764
Remove			

**. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself. (if not applicable, indicate N.4)	E. If amending or adding additional A (Attach additional sheets, if necessar)	a). (Be specific)	 -		
provisions for implementing the amendment if not contained in the amendment itself: (if not applicable, indicate $N(A)$					
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	provisions for implementing the a	<u>mendment if not contain</u>	ed in the amendment	itself:	
NA		l			
	NA				
		**		.	
		····			

JUNE 09, 2018	
	, if other than the
date this document was signed.	
Effective date if applicable:	
(no more than 90 days after amendment file date)	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date wi document's effective date on the Department of State's records.	Il not be listed as the
Adoption of Amendment(s) (CHECK ONE)	
The amendment(s) was/were adopted by the shareholders. The number of votes east for the amendment(s) by the shareholders was/were sufficient for approval.	
☐ The amendment(s) was/were approved by the shareholders through voting groups. The following statement must be separately provided for each voting 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)	
☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.	
☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.	
JUNE 11, 2018 Dated	
Signature (USEY (TWIS))	
(By a director, president or other officer – if directors or officers have not been selected by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)	
CASEY T TWISS	
(Typed or printed name of person signing)	
PRESDENT	
(Title of person signing)	

. . . .