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(Address)

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(City/State/Zip/Phone #)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. SCOTT

DEC 29 2016

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Atrium Capital Management, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christian Novy

Name of Person

Atrium Capital Management, LLC

Firm/Company

3339 Virginia Street, Suite 337

Address

Miami, FL 33133

City/State and Zip Code

christian.novy@comcast.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christian Novy

305 546 8552
at ()

Name of Person

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee ☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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SECRETARY OF STATE

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Atrium Capital Management, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 09/06/2007 and assigned
Florida document number L07000091986.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

Atrium Capital, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

3339 Virginia Street, Suite 337

(Principal office address MUST BE A STREET ADDRESS)

Miami, FL 33133

Enter new mailing address, if applicable:

3339 Virginia Street, Suite 337

(Mailing address MAY BE A POST OFFICE BOX)

Miami, FL 33133

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Alexander Novy

New Registered Office Address:

4175 Raynolds Avenue

Enter Florida street address

Miami

City

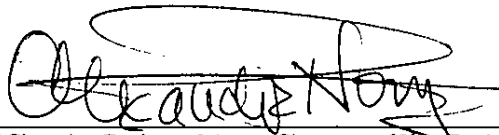
Florida

33133

Zip Code

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

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.



If Changing Registered Agent, Signature of New Registered Agent

7/ If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Nicholas Novy	3339 Virginia Street, Suite 337	<input checked="" type="checkbox"/> Add
		Miami, FL 33133	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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TALLAHASSEE, FLORIDA

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.

Dated December 12 2016

2016

Christina Turner

Signature of a member or authorized representative of _____

Christian Novy

Typed or printed name of signee

Filing Fee: \$25.00