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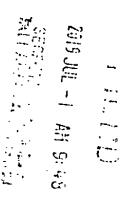
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COVER LETTER

Division of Corpo	rations		
SUBJECT:	ALTA HOLDI	NGS. LLC	
	Name of Lim	ited Liability Company	
The enclosed Articles of Ar	nendment and fee(s) are sub-	mitted for filing.	
Please return all correspond	ence concerning this matter	to the following:	
	JOHN	J. MANN	
	Name of Limited Liability Company Seles of Amendment and fee(s) are submitted for filing. Department of Person Salta Houses Like Firm/Company 2071 56Th Ave Like Address Banenton FL 34203 City/State and Zip Code Dave Mann of Atlaspolution Sinc. Net E-mail address: (to be used for future annual report notification) ation concerning this matter, please call: D. Mann at (941) Size 9752 Daytime Telephone Number		
	SALTA	HOLDINGS LLC	
		Firm/Company	
	2071 5	CATH DIE LIE	
		Address	
		7	
	BRADEN	TOW: FL 34203 City/State and Zin Code	
	E-mail address: (1	to be used for future annual report notific	ration)
For further information con-	cerning this matter, please ca	all:	
Town X	M.	Quy 0.2	G G E A
		at (<u>191</u>) <u>112 -</u> Area Code Daytime 3	Telephone Number
Enclosed is a check for the f	following amount:		
. /	_	□ \$55.00 Filing Fee &	□ \$60.00 Filing Fee
		Certified Copy	Certificate of Status & Certified Copy
MAILIN	G ADDRESS:	STREET/COURIE	R ADDRESS:
Registration	on Section	Registration Section	

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

TO:

Registration Section

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

TO ARTICLES OF ORGANIZATION OF

SALTA HOLDINGS, 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 $\frac{06/02/201/}{}$ and assig Florida document number $\frac{L11000064659}{}$.
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC"
Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)
B. If amending the registered agent and/or registered office address on our records, enter the name of registered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address: Enter Florida street address
, Florida
City 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 provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with a

If Changing Registered Agent, Signature of New Registered Agent

accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this documbeing 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.

· removed from our records.

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of A
MERM	JACK F. WAYBRIGHT TIL		
		2071 58th Ave Cie E BRADENT	ON, FL 34203 P Remo
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Effec	tive date, if other than the date of filing: (option	nal)	
(If an e Note	ffective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after fig. If the date inserted in this block does not meet the applicable statutory filing requirements, this ement's effective date on the Department of State's records.	iling.) Pursu	ant to 605. ot be fiste
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a. e 90th day after the record is filed.	m. on th	e earlie
Dated	1_ June 26 TH 2019.		
	Signature of a member or authorized representative of a member		
	orginature of a member of authorized representative of a member		
	JOHN D. MANN Typed or printed name of signce		
	Typed or printed name of signee		

Page 3 of 3

Filing Fee: \$25.00