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Division of Corporations

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L150000 44890

Florida Department of State
Division of Corporations
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To:

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Fax Number : (850)617-6383

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Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
ATALAYA 1345, LLC

Certificate of Status	0
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FILED
15 MAR 17 AM 7:12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

REC'D
15 MAR 17 AM 10:00
BUREAU OF COMMERCIAL
INFORMATION SERVICES

MAR 17 2015

T. HAMPTON

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

ATALAYA 1345, LLC

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

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The Articles of Organization for this Limited Liability Company were filed on March 12, 2015 and assigned
Florida document number L15000044890

This amendment is submitted to amend the following:

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

ATALAYA GROUP, LLC

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

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 the new
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 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

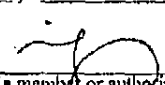
D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

(This area is crossed out with a diagonal line.)

E. Effective date, if other than the date of filing: _____ *(optional)*

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated March 17, 2015



Signature of a member or authorized representative of a member

Nicholas Stanham *Authorized Representative*

Typed or printed name of signee

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TALLAHASSEE, FLORIDA