

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H180000337923)))



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To:			JAN 29
10.	Division of Corporations	3	7
	Fax Number : (850) 617-638	,	
From:	Account Name : C T CORPORAT	ION SYSTEM	
	Account Number : FCA000000023	!	1
	Phone : (614)230-333 Fax Number : (954)208-084	5 5	
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Ema	ual report marlings. Enter only il Address:		
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	LLC AMND/RESTATE/CORR	ECT OR M/MG RES	IGN
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D. SCOTT JAN 3 0 2018

COVER LETTER

Division of C					
SUBJECT: ATCPO	mderosa K LLC			_	
	Name of Foreign	Limited Liability Con	ipany	~	
Dear Sir or Madam:					
The enclosed applica	ation, certificate and fee(s) a	re submitted for filing.			
Please-return all corr	espondence concerning this	matter to the following	ኛ :		
Cristal	Rivera				
	Name of Person				
American-	Timer Corp.				
	Firm/Company				
116 Huntin	gton Avenue			2018	
	Address			. • -	1
Basam ma	4 1.C3 p		· •	2018 JAN 29 A	FILED
	City/State and Zip Code				111
					كرسا
annual.reports@americ				· 6	
E-mail address: (to	be used for future annual i	report notification)		00	
For further informati	on concerning this matter, p	olease call:			
		at ()			
Nam	e of Person	Area Code & Dayti	me Telephone Numbe	r	
• •		•	•		•
	DURIER ADDRESS:		LING ADDRESS:		
Registration Division of C			tration Section ion of Corporations		
Clifton Build			Box 6327		
	ive Center Circle Florida 32301	Tallal	hassee, Florida 32314		
	for the following amount:				
☐ \$25 Filing Fee	□ \$30 Filing Fee & Certificate of Status	☐ \$55 Filing Fee & Certified Copy	© \$60 Filing Fee, Certificate of St Certified Copy	atus &	
CR2E055 (12/14)			Certified Copy		

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT **BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the	e Florida Department of
State: Ka Towers, us	
2. The Florida document number of this limited liability company is: $\underline{\text{M1400}}$	0007792
3. Jurisdiction of its organization; Delaware	
4. Date authorized to do business in Florida: 10/27/2014	<u> </u>
SECTION II (5-9 complete only the applicable changes)	
5. New name of the limited liability company; .ATC Ponderosa K LLC	
(must contain "Limited Liability Com	pany, ""L.L.C.," or "LLC;")
(If name unavailable, enter alternate name adopted for the purpose of transacting his iness in Florida consent of the managers or managing members adopting the alternate name. The alternate name must Company," "L.1.C." or "Li.C.")	
6. If amending the registered agent and/or registered office address on our rethe new registered agent and/or/the new registered office address here: Name of New Registered Agent: New Registered Office Address:	Ja 29
Ener Florida Sincer Ac	When
Cuy	Florida Zip Code C-
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agree to act in this comply with the provisions of all statutes relative to the proper and complet duties, and I am familiar with and accept the obligations of my position as a provided for in Chapter 605, F.S. Or, if this document is being filed to mere registered office address. I hereby confirm that the limited liability company writing of this change.	e performance of my registered agent as iy reflect a change in the
If Changing Registered Agent. Suspature of New Re	ristered Agent
7. If the amendment changes the jurisdiction of organization, indicate new j	urisdiction:

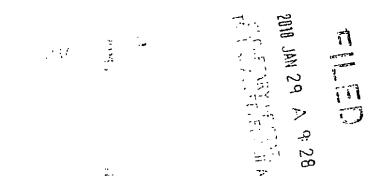
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aforementioned an		an 90 days old, evidencing the ed by the official having custo	
jurisoretion ander		nuthorized representative	····1

Filing Fee: \$25.00



Page 1

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THAT THE SAID 'K2 TOWERS, LLC', FILED A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO 'ATC PONDEROSA K LLC' ON THE THIRD DAY OF OCTOBER, A.D. 2017, AT 10:54 O'CLOCK A.M.





4680746 8320 SR# 20180537183 Authentication: 202044981

Date: 01-26-18