M2200006829

(Requestor's Name)		
(Address)	200	39457
(Address) (City/State/Zip/Phone #)	NIC	Ame
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		e e e e e e e e e e e e e e e e e e e
Certified Copies Certificates of Status		LGKD%
Special Instructions to Filing Officer:		
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Office Use Only



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SEP 21 2022

CORPORATION SERVICE COMPANY

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195		
REFERENCE : 962138 4304394		
AUTHORIZATION : Spelle was		
COST LIMIT : \$ 25.00		
ORDER DATE : September 19, 2022		
ORDER TIME : 9:52 AM		
ORDER NO. : 962138-025		
CUSTOMER NO: 4304394		
FOREIGN FILINGS		
NAME: AMPCO ASSET COMPANY, LLC		
CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY		
XXXX AMENDMENT		
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:		
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING		
CONTACT PERSON: Alexxis Weiland EXT#		

EXAMINER: ___

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: AMPCO Asset Company, LLC	
Name of Foreign	n Limited Liability Company
Dear Sir or Madam:	
The enclosed application, certificate and fee(s)	are submitted for filing.
Please return all correspondence concerning thi	s matter to the following:
Mary Grace De Asis	
Name of Person	
Mayer Brown LLP	
Firm/Company	
71 South Wacker Drive	
Address	·
Chicago, IL 60606	
City/State and Zip Code	
mdeasis@mayerbrown.com	
E-mail address: (to be used for future annual	report notification)
For further information concerning this matter,	please call:
Mary Grace De Asis	at ()
Name of Person	Area Code & Daytime Telephone Number
Mailing Address:	Street Address:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee
Tallahassee, FL 32314	2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following:	amount:
	□ \$55 Filing Fee & □ \$60 Filing Fee, Certified Copy Certificate of Status &
CR2E055 (9/15)	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)

Name of limited liability Company as it appears AMPCO Asset Company 11 C	s on the records of the Florida Department of	
State: AMPCO Asset Company, LLC Enter new principal office address, if applicable:	202	
(Principal office address MUST BE A STREET ADDRESS)	MR2 SEP	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	20 MIO: 37	
2. The Florida document number of this limited liab	bility company is: M22000006829	
3. Jurisdiction of its organization: Delaware		
4. Date authorized to do business in Florida: 05/03	3/2022	
5. New name of the limited liability company: AL (must		
(If name unavailable, enter alternate name adopted copy of the written consent of the managers or man must contain "Limited Liability Company," "L.L.C	for the purpose of transacting business in Florida and attach a naging members adopting the alternate name. The alternate name C." or "LLC.")	
6. If amending the registered agent and/or registere registered agent and/or the new registered office ad	ed officer address on our records, enter the name of the new ddress here:	
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida Street Address	
<u>-</u>	. Florida	
the provisions of all statutes relative to the proper c and accept the obligations of my position as registe	tt and agree to act in this capacity. I further agree to comply with and complete performance of my duties, and I am familiar with ered agent as provided for in Chapter 605, F.S. Or, if this in the registered office address, I hereby confirm that the limited	

. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:				
le/ Capacity	Name	Address	Type of Actio	
			DAdd	
			□Remo	
			□Add	
			□Rem	
			□Add	
			□Remo	
	<u> </u>		DAdd	
			□Rem	
			□Add	
aforementioned an	he law of which this entity is organ Signature of t	the official having custody of records i	□Remo	

Filing Fee: \$25.00

Page 1

<u>Delaware</u>

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT THE SAID "AMPCO ASSET COMPANY,

LLC", FILED A RESTATED CERTIFICATE, CHANGING ITS NAME TO "ALTO

ASSET COMPANY 5, LLC" ON THE FOURTEENTH DAY OF SEPTEMBER, A.D.

2022, AT 9:21 O'CLOCK P.M.

AND I DO HEREBY FURTHER CERTIFY THAT THE AFORESAID LIMITED
LIABILITY COMPANY IS DULY FORMED UNDER THE LAWS OF THE STATE OF
DELAWARE AND IS IN GOOD STANDING AND HAS A LEGAL EXISTENCE NOT
HAVING BEEN CANCELLED OR REVOKED SO FAR AS THE RECORDS OF THIS
OFFICE SHOW AND IS DULY AUTHORIZED TO TRANSACT BUSINESS.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "ALTO ASSET COMPANY 5, LLC" WAS FORMED ON THE SECOND DAY OF MAY, A.D. 2022.



Authentication: 204428439

Date: 09-19-22

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: AMPCO Asset Company, LLC	
	Limited Liability Company
Dear Sir or Madam:	
The enclosed application, certificate and fee(s) a	re submitted for filing.
Please return all correspondence concerning this	matter to the following:
Mary Grace De Asis	
Name of Person	
Mayer Brown LLP	
Firm/Company	
71 South Wacker Drive	
Address	
Chicago, IL 60606	
City/State and Zip Code	
mdeasis@mayerbrown.com	
E-mail address: (to be used for future annual r	eport notification)
For further information concerning this matter, p	please call:
Mary Grace De Asis	312 701-8867
Name of Person	Area Code & Daytime Telephone Number
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a check for the following a \$\textstyle \text{S30 Filing Fee & Certificate of Status}\$ \$CR2E055 (9/15)	