

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000094420

**Entity Name:** UPLANDER MORTGAGE LLC

**Current Principal Place of Business:**

975 N. MIAMI BEACH BLVD  
NORTH MIAMI BEACH, FL 33162

**Current Mailing Address:**

P.O. BOX 820  
HALLANDALE, FL 33008 US

**FEI Number:** NOT APPLICABLE

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

GRATSIANI, GIDEON  
975 N. MIAMI BEACH BLVD  
NORTH MIAMI BEACH, FL 33162 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:** GIDEON GRATSIANI

04/07/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGRM  
Name KATZ, SHMUEL  
Address P.O. BOX 820  
City-State-Zip: HALLANDALE FL 33008

Title MGRM  
Name SACKS, SHMUEL  
Address P.O. BOX 820  
City-State-Zip: HALLANDALE FL 33008

Title MGRM  
Name URIEL, LEVINGER DR.  
Address P.O. BOX 820  
City-State-Zip: HALLANDALE FL 33008

Title MGRM  
Name ROZNER, MOSHE  
Address P.O. BOX 820  
City-State-Zip: HALLANDALE FL 33008

Title MGRM  
Name ISRAELI, EZRA  
Address P.O. BOX 820  
City-State-Zip: HALLANDALE FL 33008

Title MGRM  
Name DYC GROUP LLC  
Address P.O. BOX 820  
City-State-Zip: HALLANDALE FL 33008

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** GIDEON GRATSIANI

**REGISTERED AGENT**

04/07/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date