F19000004859

(Requestor's Name)	
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(Business Entity Name)	
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COVER LETTER

TO: Amendme	ent Section Division of Corporati	ons	
SUBJECT: MODI	ELR, INC.		
	Nam	e of Corporation	
DOCUMENT NU	MBER: F19000004859		
The enclosed Ame	ndment and fee are submitted for	r filing.	
Please return all co	prespondence concerning this ma	atter to the following:	
BATALHA, LUIZ			
	Name of Contact Person		
MODELR, INC.	Firm/Company		
	Time Company		
7648 Pointe Venez			
	Address		
Orlando, FL 3283			
	City/State and Zip Code		
Dennis@upstay.co			
E-mail addre	ss: (to be used for future annual)	report notification)	
For further informa	ation concerning this matter, plea	se call:	
BATALHA, LUIZ		at (407)399-9308	
Name	e of Contact Person	Area Code & Daytime	Telephone Number
Enclosed is a check	k for the following amount:		
Z \$35 Filing Fee	☐ \$43.75 Filing Fee & Certificate of Status	☐ \$43.75 Filing Fee & Certified Copy	☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 **Street Address:**

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

PROFIT CORPORATION APPLICATION BY FOREIGN PROFIT CORPORATION TO FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

(Pursuant to s. 607.1504, F.S.)

SECTION I (1-3 MUST BE COMPLETED)

F19000004859					
(Docume	nt number of corporation (if known)				
1. MODELR, INC.					
	it appears on the records of the Depar	tment of Sta	ate)		
2. DELAWARE	3. OCTOBER 26, 20	119			
(Incorporated under laws of)			business in Florid	a)	
	SECTION II				
(4-7 COMPLETE	E ONLY THE APPLICABLE CHA	NGES)			
4. If the amendment changes the name of the corporation,	, when was the change effected under	the laws of	its jurisdiction of	î	
incorporation?	, , , , , , , , , , , , , , , , , , ,				
5					
(Name of corporation after the amendment, adding suf not contained in new name of the corporation)	fix "corporation," "company," or "inc	corporated,"	or appropriate ab	breviation	n, if
,					
(If new name is unavailable in Florida, enter alternate c	orporate name adopted for the purpos	se of transac	ting business in I	·lorida)	
6. If the amendment changes the period of duration,					_
o. It the amendment changes are period of duration,	moteate new period of duration,				
			3 .()	202	
	(New duration)		, , , , , , , , , , , , , , , , , , ,	، ا	المترافات ا
				2021 JUN - 1	
7. If the amendment changes the jurisdiction of incor	poration, indicate new jurisdiction.				
			_		7.1
	(New jurisdiction)			ယ ယ	لور
0.16				.π	
 If amending the registered agent and/or registered of new registered agent and/or the new registered office 		name of the	<u> </u>		
Name of New Registered Agent					
Name of New Registered Agent					
	Florida street address)		··-		
	Torsus Sirver duaressy				
New Registered Office Address:	(City)	, Florida_	(Zip Code)	_	
Now Desistand Agent's Constant of Land -	•		(esp cons)		
New Registered Agent's Signature, if changing Reg I hereby accept the appointment as registered agent.	ustered Agent: I am familiar with and accept the obli	igations of t	he position.		
-	•	V	4		
Signature of New Registered Agent, i	if changing				

Title/ Capacity	Name	Address	Type of Action
CFO HEY	NRY WONG	1291 SQUIRE DRIVE	_Add
		MANOTICK, ONTARIO K4M 1B8 CA	Remove
<u>DE</u>	NNIS CHUI	1291 SQUIRE DRIVE	DbbA
	MANOTICK, ONTARIO K4M 1B8 CA	Remove	
			QAdd
			Remove
			C Remove
			🗀Add
			Remove

(Title of person signing)

(Typed or printed name of person signing)