

LD9000096429

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

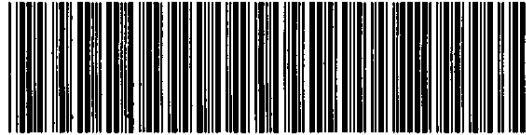
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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05/03/16

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2016 MAY -2 AM 03:29 -2 PM 3:41

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SECRETARY OF FLORIDA  
TALLAHASSEE, FLORIDA

MAY 04 2016

S. YOUNG

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** UPSIDE MANAGEMENT LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Statement of Authority and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

LORENE SEELER YOUNG, ESQ.

Name of Person

LORENE SEELER YOUNG PA

Firm/Company

9124 GRIFFIN ROAD

Address

COOPER CITY FL 33328

City/State and Zip Code

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

LORENE SEELER YOUNG

Name of Person

954

Area Code

585-3967

Daytime Telephone Number

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

FILED STATE  
SECRETARY OF FLORIDA  
TALLAHASSEE, FL  
16 MAY -2 PM 3:42

**STATEMENT OF AUTHORITY**

Pursuant to section 605.0302(1), Florida Statutes, this limited liability company submits the following statement of authority:

**FIRST:** The name of the limited liability company is: UPSIDE MANAGEMENT LLC

**SECOND:** The Florida Document Number of the limited liability company is: L000096429

**THIRD:** The street address of the limited liability company's principal office is:

7771 W. OAKLAND PARK BLVD #100

SUNRISE, FL 33351

The mailing address of the limited liability company's principal office is:

7771 W. OAKLAND PARK BLVD #100

SUNRISE, FL 33351

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TALLAHASSEE, FLORIDA  
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**FOURTH:** This statement of authority grants or sets limitations of authority on all persons having the status or position of a person in a company, whether as a member, transferee, manager, officer or otherwise or to a specific person on the following:

1. May execute an instrument transferring real property held in the name of the company.

- a. Granted to: Yanir Hadan as President of YH Developers, Inc., a Florida limited liability company  
OR Amnon Zakay as Manager of Yard Holdings, LLC, a Florida limited liability company \*\*

b. No authority granted to: \_\_\_\_\_

2. May enter into other transactions on behalf of, or otherwise act for or bind, the company.

- a. Granted to: Yanir Hadan as President of YH Developers, Inc., a Florida limited liability company  
OR Amnon Zakay as Manager of Yard Holdings, LLC, a Florida limited liability company \*\*

b. No authority granted to: \_\_\_\_\_

\*\* both are Members

YH DEVELOPERS, INC., a Florida corporation

Member

By: [Signature]  
Signature of authorized representative

Yanir Hadan, President

Typed or printed name of signature

Filing Fee: \$25.00

Certified Copy: \$30.00 (optional)