

K12 000035762

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

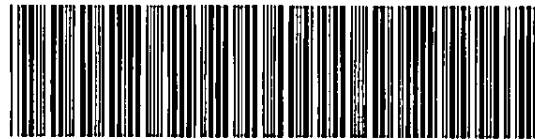
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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08/16/21--01025--011 **25.00

2021 SEP -7 AM 8:06
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

SEP - 8 2021



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
211 SEP 7 PM 3:43

August 26, 2021

PHILLIPPE BOURIQOUT
6586 HYPOLUXO ROAD #364
LAKE WORTH, FL 33467

SUBJECT: INVESTMENT FREEDOM PROPERTY LLC
Ref. Number: L12000035762

We have received your document for INVESTMENT FREEDOM PROPERTY LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

On the amending authorized person page please put the type of action for Phillippe correctly and check change not add. For Joseph Herode and Marjorie Casimmir please put them on the correct lines and provide the titles and address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Catherine M Brumbley
Regulatory Specialist II

Letter Number: 421A00020576

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: investment freedom property llc

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

philippe bourciquot

Name of Person

investment freedom property llc

Firm/Company

6586 hypoluxo road # 364

Address

lake worth ,florida,33467

City/State and Zip Code

investmentfreedompropertyllc@gmail.com

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

For further information concerning this matter, please call:

philippe bourciquot

5618537505

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

investment freedom property llc

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on state of florida and assigned
Florida document number L12000035762.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

UPGRADE MY PROPERTY LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

6586 HYPOLUXO road # 364

(Principal office address MUST BE A STREET ADDRESS)

lake worth florida, 33467

Enter new mailing address, if applicable:

same

(Mailing address MAY BE A POST OFFICE BOX)

same

same

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

philippe bourciquot

New Registered Office Address:

7896 blairwood cir .s.

Enter Florida street address

lake worth

Florida 33467

City

Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

JOSEPH HERODE ,remove out

MARJORIE REMOVE out

only philippe bourciquot MGR

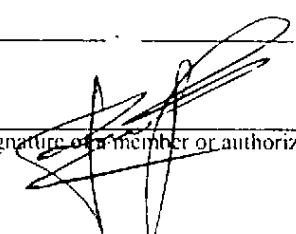
E. Effective date, if other than the date of filing: 08/09/2021 **(optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 08/09/2021



Signature of a member or authorized representative of a member

philippe bourciquot

Typed or printed name of signer