

L15000100042

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

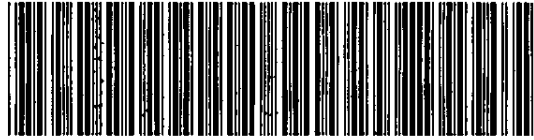
(Business Entity Name)

(Document Number)

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L15-100042

Amend

05/09/16--01027--006 **25.00

FILED
16 MAY -9 PM 3:27
TALLAHASSEE FLORIDA

MAY 11 2016

N. CAUSSEAU

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: UPPER TRAINING, 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:

Christina Zelner.
Name of Person

UPPER TRAINING, LLC
Firm/Company

201 St. Lucie Lane, Apt. 106
Address

Coconut Beach, FL 32931
City/State and Zip Code

pc@upperwego.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christina Zelner at (321) 258-7363
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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

UPPER TRAINING, LLC

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

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CLERK OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on June 8, 2015

Florida document number L15000100042

This amendment is submitted to amend the following:

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

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:

(Principal office address MUST BE A STREET ADDRESS)

355 Golden Knights Blvd. Ste 206
Titusville, FL 32780

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

201 St. Lucie Lane, Apt. 106
Cocoa Beach, FL 32931

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:

Christina L. Zelner

New Registered Office Address:

201 St. Lucie Lane, Apt. 106

Enter Florida street address


Cocoa Beach, Florida 32931

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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Antonius G. Steenland	11800 Eagle Ray Lane	<input type="checkbox"/> Add
		Orlando, FL 32827	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Christina L. Zelner	201 St. Lucie Lane, Apt. 106	<input checked="" type="checkbox"/> Add
		Coconut Beach, FL 32931	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

DEPT. OF STATE
 TALLAHASSEE, FLORIDA
 6 MAY 9 PM 3:2
 FILED
 106

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

Multiple horizontal lines for amending information.

16 MAY - 9 PM 3:27
DEPT. OF STATE
TALLAHASSEE
FLORIDA

FILED

E. Effective date, if other than the date of filing: May 19, 2016 (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 April 27 2016

Signature of a member or authorized representative of a member

Anthony G. Steenland
Typed or printed name of signee