## 17600244767

Fm: Interstate Filings LLC To: UPSIDE26 LLC (18506176383)

12/14/2017

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Division of Corporations

## Florida Department of State

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **UPSIDE26 LLC**

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

UPSIDE26 LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Jability Company)	<del></del>
The Articles of Organization for this Limited Liability Company Florida document number <u>L17000244762</u> .	were filed on 11/29/2017	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name unist be distinguishable and end with the words "Limited Liab	oility Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADDRESS)		三
	The Control of the Co	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<del>- 5</del> 55
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her	ffice address on our records, en	nter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	r ri dan din	
	Enter Florida street address	
	, Florid	aZip Code
	Sep	M. 1

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

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If amending the Managers or Authorized Member on our records, <u>enter the fitle, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	BAROUCH, YONATHAN	10620 GRIFFIN ROAD, STE. 10	8 □ Add
		COOPER CITY, FL 3332	28 Remove
			Add
			Remove
			□ Remove
			Add
		€ <b>\</b>	☐ Remove
			□ Remove
			□ Add
			□ Remove

). If amending any other information, enter change(s) here: Attach additi	ional sheets, if necessary j
	• •
Effective date, if other than the date of filling:	
The chieffive date must be specific connor be reign to date and	(optional)
the date this document is filed by the Florida Department of State)	e mane man wo have aner
Dated 12/14/2017:	
$\mathcal{M}$	
Signature of a member or authorized representative	<del></del>
YONATHAN BAROUCH	or a member

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