L18000109443

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
, , , , ,
PICK-UP WAIT MAIL
(Business Entity Name)
(Dusiliess Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
CCW23

Office Use Only



300313349533

05/17/18--01019--023 +*325.00

2016 JUH -8 PM 4: 5

B FIGUEROA JUN 15 2018





May 18, 2018

MARIA FANTI 8724 SUNSET DR #171 MIAMI, FL 33173

SUBJECT: UPRIGHT MORTGAGE LLC

Ref. Number: L18000109443

We have received your document for UPRIGHT MORTGAGE 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.

Please return the corrected original and one copy of 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) 245-6051.

Brittany M Figueroa
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 518A00010481

COVER LETTER

TO: Registration S Division of Co			
	MORTGAGE LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	(Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Maria Fanti		
	-	Name of Person	
	Uplevel Managment LLC		
		Firm Company	. —
	8724 Sunset Drive #171		
		Address	
	Miami, FL 33173-3512		
		City/State and Zip Code	 _
	UplevelManagment@Gmai	Leom to be used for future annual report notific	ordinari)
For further information	concerning this matter, please co		(Lancin)
Duk Lorenzen, Esq.		305 447 1203	
Name	of Person	at ()	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)
MAII	LING ADDRESS:	STREET/COURIE	CR ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

UPRIGHT MORTGAGE LLC		
(<u>Name of the Limited Liability Comp:</u> (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L18000109443	were filed on 05/01/2018	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company." the designation "LLC" or	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	Uplevel Managment LLC	
• •	8724 Sunset Drive # 171	2013
Principal office address MUST BE A STREET ADDRESS)	Miami, FL 33173-3512	- ,
Enter new mailing address, if applicable:	Uplevel Managment LLC	20
(Mailing address MAY BE A POST OFFICE BOX)	8724 Sunset Drive # 171	P P
	Miami, FL 33173-3512	13- H: 5 6
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent:		••
New Registered Office Address:	Enter Florida street address	
	Flori	
	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 = Månager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Van Grieken, Maria		Add
			■ Remove
			Change
MGR	Fanti, Maria		= Add
			□ Remove
			Change
			Remove
			Change
			
			□ Remove
			Change
			Remove
			☐ Change
	<u></u>		□ Add
			□ Remove
			☐ Change

	-
	-
	-
	-
	- -
	- -
	<u>-</u>
	-
	2018
<u> </u>	
	Z ∋0
1 Q	:- :-
	וכ
	-
	_
	_

Page 3 of 3

Filing Fee: \$25.00