L18000109459

(Re	equestor's Name)	
(Ad	Idress)	
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Registration Se Division of Cor			
	JINS AVE UNIT 312, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
	Amendment and fee(s) are sub		
	Maria Fanti		
		Name of Person	
	Uplevel Managment LLC		
		Firm Company	
	8724 Sunset Drive #171		
		Address	
	Miami, FL 33173-3512		
	UplevelManagment@Gmai	City/State and Zip Code Leom	
	E-mail address; (to be used for future annual report noti	fication)
For further information of	concerning this matter, please ca	all:	
Dirk Lorenzen, Esq.		305 447 1203 at () Daytim	
Name o	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for t	he following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy radditional 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

18 JUN 8 PM 3 44

9172 COLLINS AVE UNIT 312, LLC			
(Name of the Limited Liability Compa (A Florida Limited)	iny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Clorida document number <u>L18000109459</u> .	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	lity Company," the designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	Uplevel Managment LLC		
Principal office address MUST BE A STREET ADDRESS)	8724 Sunset Drive # 171		
	Miami, FL 33173-3512		
Enter new mailing address, if applicable:	Uplevel Managment LLC		
Mailing address MAY BE A POST OFFICE BOX)	8724 Sunset Drive # 171		
	Miami, FL 33173-3512		
B. If amending the registered agent and/or registered of egistered agent and/or the new registered office address her Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	, Florida		
_ 	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 Type of Action <u>Address</u> Title <u>Name</u> Van Grieken, Maria MGR □ Add ■ Remove ☐ Change Fanti, Maria MGR ■ Add ☐ Remove ☐ Change □ Add ☐ Remove _□ Change _ 🗖 Add _□ Remove ☐ Change □ Add □ Remove □ Change □ Add ☐ Remove _□ Change

					
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May 15.	201	8	M		
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		ol la			
	Signature of a member		resentative of a memb		

Page 3 of 3

Filing Fee: \$25.00



May 18, 2018

UPLEVEL MANAGEMENT LLC MARIA FANTI 8724 SUNSET DR. #171 MIAMI, FL 33173-3512

SUBJECT: 9172 COLLINS AVE UNIT 312, LLC

Ref. Number: L18000109459

We have received your document for 9172 COLLINS AVE UNIT 312, LLC and your check(s) totaling \$325.00. 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 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.

Letter Number: 518A00010462

Karen A Saly Regulatory Specialist II

www.sunbiz.org