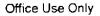
L19000107310

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





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COVER LETTER

TO: Registration Se Division of Cor			
OF UP AND OWN	DUSE LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	lzi Pinho		
		Name of Person	
	Pinho Law, PLLC		
		Firm/Company	
	6965 Piazza Grande Ave, Suite 203		
		Address	
	Orlando, FL 32835		
		City/State and Zip Code	
	izi@pinholaw.com		<u> </u>
		to be used for future annual report noti	fication)
For further information c	oncerning this matter, please c	all:	
Izi Pinho		321 209-8282 at ()	
Name o	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	he 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)
Registr Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce	on rations

Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

UPPER HOUSE, LLC

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

(A Florida Limited Liability Company)

(A rouge	a Chilled Elability Company)	
The Articles of Organization for this Limited Liability C	Company were filed on (14/19/2019	and assigned = ບຸ
Florida document number 1.19000107310		
This amendment is submitted to amend the following:		19 JUL -1
A. If amending name, enter the new name of the lim	ited liability company here:	PH 12:
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDI	RESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office add	·	ter the name of the i
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Florida	
	City	Zîp Code
New Registered Agent's Signature, if changing Registere	d Agent:	
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and c accept the obligations of my position as registered a being filed to merely reflect a change in the registere company has been notified in writing of this change.	omplete performance of my duties, and L gent as provided for in Chapter 605, F.S.	am familiar with and Or, if this document is
	If Changing Registered Agent, Signature of Ne	w Registered Agent

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

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Constancia Valeria Ambrosio da Fonseca	4825 MEMORIES LN KISSIMMEE, FL 34746	■ Add
			□ Remove
		 	Change
			Remove
			Change
			
			☐ Remove
			Change
		·	Add
			□ Remove
		- 	Change
			Remove
		 	Change
			
			☐ Remove

n/a 					
				-	
	.			<u>-</u>	
					
					
			. .		
	<u> </u>				
	-				
					
		· 			
(If an effective Note: If the	date, if other than the date of filing: _ ve date is listed, the date must be specific and can he date inserted in this block does not meet 's effective date on the Department of State	mot be prior to date the applicable st	of filing or more than 9 atutory filing require	(optional) 0 days after filing.) Pursua ments, this date will no	nt to 605.0207 t be listed as
	d specifies a delayed effective date oth day after the record is filed.	e, but not an e	effective time, at	12:01 a.m. on the	e earlier of
Jun Dated	ne 21	2019			
Daicu					
	3				
	Signature of a men	iber or authorized r	epresentative of a mem	ber	

Page 3 of 3

Filing Fee: \$25.00