119000267553

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

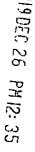


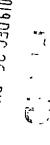
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S TALIFY:







COVER LETTER

TO:

Tallahassee, FL 32314

TO: Registration Se Division of Cor			
SUBJECT: UPSWIN	G MULTIMEDIA LLC		
SUBJECT:		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	indence concerning this matter	to the following:	
	CHRISTY CANCIO		
		Name of Person	
	UPSWING MULTIM		
		Firm/Company	
	2701 BISCAYNE BLV	D APT 6117	
	<u>.</u> .	Address	
	MIAMI, FL 33137		
		City/State and Zip Code	
	christy@upswingmultir		
	E-mail address: (to be used for future annual report notifi	ication)
For further information c	oncerning this matter, please ca	all:	
CHRISTY CANCIO		at (<u>786</u>) 326-869	91
Name o	f Person		Telephone Number
Enclosed is a check for th	ne 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 Addres		Street Address:	.·.
Registration S		Registration Sec	
Division of C P.O. Box 632		Division of Corp The Centre of Ta	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

UPSWING MULTIMEDIA LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 10/24/2019 and assigned Florida document number L19000267553 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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address

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>	Address	Type of Action
MGR_	CHRISTY CANCIO	2701 BISCAYNE BLVD, APT 6117	□Add
		MIAMI, FL 33137	□Remove
MGR ANN COWARD	ANN COWARD	5210 SW 148 AVE	□Add
	MIRAMAR,, FL 33027	□Remove	
MGR JIMMY RIVERA	1331 HAMPTON BLVD	ØAdd	
	NORTH LAUDERDALE, FL 33068	□Remove	
			□ Change
			□Add
			Remove
			□Change
			🗆 Add
			□Remove
			□Change
		🗆 Add	
			□Remove
			□Change

li an ei Note:	tive date, if other than the date of filing:
e reco rd is f	ord 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 filed.
Dated	December 10th . 2019
	/ ///
	Signature of a member or authorized tepresentative of a member

Filing Fee: \$25.00