

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

OCT 2.2 2015 S. YOUNG



FLORIDA DEPARTMENT OF STATE Division of Corporations

September 28, 2015

GERSON F KOHLER 2300 SW 4 AVENUE MIAMI, FL 33126

SUBJECT: UP PROPERTIES, LLC Ref. Number: W15000064585

We have received your document for UP PROPERTIES, LLC and your check(see totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

A certificate of existence or a certificate of good standing, dated no more than 90 days prior to the delivery of the application to the Department of State, duly authenticated by the secretary of state or other official having custody of the records in the jurisdiction under the laws of which it is incorporated/organized, must be submitted to this office. A translation of the certificate under oath of the translator must be attached to a certificate which is in a language other than the English language. A photocopy of this certificate is not acceptable.

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.

Shelia H Young Regulatory Specialist II

Letter Number: 015A00020481

direct # . 850 - 245 - 6084

6030

fax: 850-245-60500

www.sunbiz.org

AND THE TOTAL TOTA

COVER LETTER

TO:

Registration Section

Name of Limited Liability Company						
	Foreign Limited Liability Comitted to register the above refer					
se return all corresponden	ce concerning this matter to the	following:				
GERSON F	. KOHLER					
	N	lame of Person			-	
UP PROPE	RTIES, LLC			TAL TAL	话	
	F	irm/Company		ALC:	SEP T	
2300 SW 4	AVE			ASSE	25 PH	
		Address		一 三 三 の	. 장 - 등 (
MIAMI FL	. 33126			ORID.	5: 19	
	City/S	State and Zip Code			. 0	
FEKOHLER	@GMAIL.COM					
	E-mail address: (to be use	d for future annua	l report no	tification)	-	
urther information concer	ning this matter, please call:					
GERSON F. KOHLER		305 at (905 36	27		
Nan	ne of Contact Person	Area Code) Day	time Telephone Number	-	
MAILING ADDRESS: Division of Corporations Registration Section P.O. Box 6327 Tallahassee, FL 32314			STREET ADDRESS: Division of Corporations Registration Section Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			
osed is a check for the fol	_	□ \$155.00 Filir	ng Fee &	□ \$160.00 Filing Fee, C	ertificate	

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

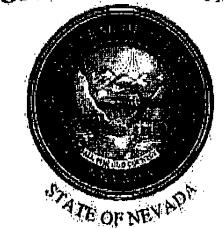
1. UP PROPERTIES, LL				
(Name of Fore	eign Limited Liability Company; must inclu	de "Limited Liability Compa	ny," "L.L.C.," o	r "LLC.")
Liability Company," "L.L.C," 2. NEVADA	iternate name adopted for the purpose of tra " or "LLC.") 3. of which foreign limited liability (Date first transacted business in F (See sections 605.0904 & 605.0905,	(FEI num	ber, if applicable	
5. 2300 SW 4 AVE	,		• /	
MIAMI FL 33126	(Street Address of Princip	al Offices		-
6. 2300 SW 4 AVE	•			ALL.
6.			· · · · · · · · · · · · · · · · · · ·	老四 89 卫
MIAMI FL 33126				25 25 25
	(Mailing Addres	s)		mo 12
7. Name and street address	s of Florida registered agent: (P.O. Bo	x NOT acceptable)		E ST
Name:	GERSON F. KOHLER			ORICE -
Office Address:	2300 SW 4 AVE			D 0
	MIAMI	, Florida _	33126	
	(City)	, 1 1011011	(Zip code)	_
this application, I hereby	gistered agent and to accept service of accept the appointment as registered a statutes relative to the proper and com tion as registered agent.	gent and agree to act in ti plete performance of my t	his capacity. I	further agree to comply
	(Registered ag	ent's signature)		_
8. The name, title or capa GERSON F. KOHLER, M	ncity and address of the person(s) who h	as/have authority to manag	ge is/are:	
2300 SW 4 AVE MIAM	I FL 33126			
jurisdiction under the law o	of existence, no more than 90 days old, of which it is organized. (If the certifica	duly authenticated by the	official having	custody of records in the
of the translator must be su	, and the second	· 7.		
	gerso fe	uthorized person		_
	/ Signature of an a	uthorized person		

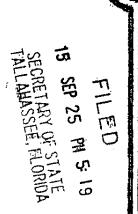
Typed or printed name of signee

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

GERSON F. KOHLER

SECRETARY OF STATE





CERTIFICATE OF EXISTENCE WITH STATUS IN GOOD STANDING

I, BARBARA K. CEGAVSKE, the duly elected and qualified Nevada Secretary of State, do hereby certify that I am, by the laws of said State, the custodian of the records relating to filings by corporations, non-profit corporations, corporation soles, limited-liability companies, limited partnerships, limited-liability partnerships and business trusts pursuant to Title 7 of the Nevada Revised Statutes which are either presently in a status of good standing or were in good standing for a time period subsequent of 1976 and am the proper officer to execute this certificate.

I further certify that the records of the Nevada Secretary of State, at the date of this certificate, evidence, UP PROPERTIES, LLC, as a limited liability company duly organized under the laws of Nevada and existing under and by virtue of the laws of the State of Nevada since August 7, 2015, and is in good standing in this state.

The state of the s

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Great Seal of State, at my office on September 2, 2015.

Ballona K. Cegawke

BARBARA K. CEGAVSKE Secretary of State

Electronic Certificate
Certificate Number: C20150902-2137
You may verify this electronic certificate
online at http://www.nvsos.gov/