

**2020 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L19000115746

**Entity Name:** UPTIMIZE LLC

**Current Principal Place of Business:**

20109 NATURES HIKE WAY  
TAMPA, FL 33647

**Current Mailing Address:**

20109 NATURES HIKE WAY  
TAMPA, FL 33647 US

**FEI Number: 83-4711041**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

UNITED STATES CORPORATION AGENTS, INC.  
5575 S. SEMORAN BLVD  
SUITE 36  
ORLANDO, FL 32822 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

SIGNATURE: AMER ABDELAZIZ

10/30/2020

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name ABDELAZIZ, AMER  
Address 20109 NATURES HIKE WAY  
City-State-Zip: TAMPA FL 33647

Title MGR  
Name SMITH, WADE  
Address 20109 NATURES HIKE WAY  
City-State-Zip: TAMPA FL 33647

Title MGR  
Name PATEL, JAY  
Address 20109 NATURES HIKE WAY  
City-State-Zip: TAMPA FL 33647

Title MGR  
Name ECHEVARRIA, ALEJANDRO  
Address 20109 NATURES HIKE WAY  
City-State-Zip: TAMPA FL 33647

Title MGR  
Name LAZAR, AUSTIN  
Address 20109 NATURES HIKE WAY  
City-State-Zip: TAMPA FL 33647

Title AMBR  
Name ABDELAZIZ, AMER  
Address 20109 NATURES HIKE WAY  
City-State-Zip: TAMPA FL 33647

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

SIGNATURE: AMER ABDELAZIZ

OWNER

10/30/2020

Electronic Signature of Signing Authorized Person(s) Detail

Date