

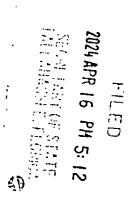
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## COVER LETTER

TQ:				
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SODJEC			ited Liability Company	<del></del>
			-	
Tredito 10		Robert J Soprano Jr	Name of Person  Firm/Company  th Ave  Address  Geach, FL 32968  City/State and Zip Code  rano@gmail.com  E-mail address: (to be used for future annual report notification)  this matter, please call:  at (	
	e return all correspondence concerning this matter to the following:    Robert J Soprano Jr			
			Firm/Company	
		514 34th Ave		
			Address	
		Vero Beach, FL 32968		
		bob.soprano@gmaił.com	City/State and Zip Code	
		E-mail address: (	to be used for future annual report notifi	cation)
For furth	ner information c	oncerning this matter, please ca	all:	
Robert J	Soprano JR			
	Name o	f Person		Telephone Number
Enclosed	l is a check for th	ne following amount:		
□ <b>\$</b> 25.	.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy

Mailing Address:
Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

UP-STARTER LLC		
( <u>Name of the Limited Liability Company</u> (A Florida Limited Liab	as it now appears on our records.) bility Company)	
The Articles of Organization for this Limited Liability Company we	ere filed on November 19,2020	_ and assigned
Florida document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabilit	ty company here:	
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "ELC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:		~
Principal office address MUST BE A STREET ADDRESS)		024
_		APR
		5 =
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		Ω̈́.
		12
-	(3)	
B. If amending the registered agent and/or registered office addagent and/or the new registered office address here:	dress on ou <mark>r records, enter the name o</mark>	f the new regi
Name of New Registered Agent:		
Naw Provintaged Office Addresses		
New Registered Office Address:	Enter Florida street address	<u> </u>
	Florida	
		Zin 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Robert J Soprano 111	514 34th Ave , Vero Beach Fl 32968	≣Add
			Remove
			□Change
AMBR	Robert J Soprano Jr	514 34th Ave Vero Beach, Fl32968	□Add
			<b>≡</b> Remove
		<del> </del>	□Change
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			□Remove
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lf an eff <del>e</del> c <u>Note:</u> - If	tive date, if other than the date of filing:	
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 90th day after the record is filed.	of:
Dated _	4/12/2024	
	Margher of a propher of all friend representatively a margher	
	Rignature of a prepriher of authorized representative of a member  Robert J Soprano Jr	