

**2024 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M21000017191

**Entity Name:** FRS UP, LLC

**Current Principal Place of Business:**

270 SYLVAN AVE, SUITE 2240  
ENGLEWOOD CLIFFS, NJ 07632

**Current Mailing Address:**

270 SYLVAN AVE, SUITE2240  
ENGLEWOOD CLIFFS, NJ 07632 US

**FEI Number:** 84-4212816

**Certificate of Status Desired:** No

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

REGISTERED AGENTS INC.  
7901 4TH ST N STE 300  
ST PETERSBURG, FL 33702 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title MGR  
Name FINANCIAL RECOVERY SERVICES  
INC  
Address 270 SYLVAN AVE, SUITE 2240  
City-State-Zip: ENGLEWOOD CLIFFS NJ 07632

Title CEO  
Name EPSTEIN, MICHAEL  
Address 270 SYLVAN AVE, SUITE 2240  
City-State-Zip: ENGLEWOOD CLIFFS NJ 07632

Title COO  
Name FOLEY, ERIN  
Address 270 SYLVAN AVE, SUITE 2240  
City-State-Zip: ENGLEWOOD CLIFFS NJ 07632

*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:** ERIN FOLEY

COO

04/03/2024

Electronic Signature of Signing Authorized Person(s) Detail

Date