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C. BRUMBLEY
FEB 2 1 2022

COVER LETTER

UUP SOCIA	ALJ.C		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.	
	ndence concerning this matter	_	
	RUSSELL WILLIAMS		
		Name of Person	
	R. WILLIAMS, P.C.		
		Firm/Company	
	333 EAST 46TH STREET	1F	
	· · · · · · · · · · · · · · · · · · ·	Address	
	NEW YORK, NY 10017		
		City/State and Zip Code	
	RUSSELLWILLIAMSNY(-	
	E-mail address: (to be used for future annual report not	ification)
For further information co	oncerning this matter, please c	all:	
RUSSELL WILLIAMS		347 6918193	
Name of	Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for the	e 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 Address	<u>:</u>	Street Address:	

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

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

UUP SOCIAL 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 FEBRUARY 12, 2021 and assigned Florida document number <u>L21000075015</u> 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 "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) C/O RUSSELL WILLIAMS Enter new mailing address, if applicable: 333 EAST 46TH STREET 1F (Mailing address MAY BE A POST OFFICE BOX) NEW YORK, NY 10017 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.

City

If Changing Registered Agent, Signature of New Registered Agent

, Florida

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
AMBR	DTSOCIALIZE HOLDING LTD	DEPT. 2195, 601 INTERNATIONAL HOUSE	= Add
		223 REGENT STREET, LONDON, UK W1B 2QD	□ Remove
			□Change
			DAdd
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
	<u> </u>		□Add
			Remove
			Change

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D. If ame	nding any other information, enter change(s) here: (Attach additional sheets; if necessary.)
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(If an effe	(c) date, if other than the date of filing:
docume	f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nt's effective date on the Department of State's records.
If the record record is file	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
Dated	DECEMBER 13 2021
<u>-</u>	Rail
	Senature of a member or authorized representative of a member
	DANIELLE MARINELLI Typed or printed name of signee