## L22000427337

	(Requestor's Name)	
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PICK-UP	WAIT MAIL	
	(Dunings Falth Name)	
•	(Business Entity Name)	
<del></del>	(Document Number)	
Certified Copies	Certificates of Status	
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Special Instructions to	Filling Officer;	
	LUOPNE	
J. HORNE		
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Office Use Only



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## **COVER LETTER**

TO:	Registration Se Division of Cor			·
CUD IE		ions LLC		
SUBJE	<u></u>	Name of Lin	sted Liebility Company	
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	rawa 20 coarespo	adence concerning this matter	to the following:	
		Curtis Hampton		
			Name of Person	
		<del> </del>	Station Rd  Address  Firm/Company  d Station Rd  Address  FL 32244  City/State and Zip Code  @yahoo.com nail address: (to be used for future annual report notification)  tier. please call:  at (	
		5515 Westland Station Rd		
			Address	
		Jacksonville, FL 32244	City State and Tim Code	
		Наприоп.Сил7@yahoo.com	fee(s) are submitted for filing.  Ing this intenter to the following:  Iton  Name of Person  Firm/Company  Ind Station Rd  Address  FL 32244  City/State and Zip Code  7@ yahoo.com  mail address: (to be used for future annual report notification)  atter. please call:  at (	
		Name of Limited Liability Company  ed Articles of Amendment and fee(s) are submitted for filing.  m zll convespondence concerning this manter to the following:  Curtis Hampton  Name of Person  Firm/Company  5515 Westland Station Rd  Address  Jacksonville, FL 32244  City/State and Zip Code  Hampton Curt 7@yahoo.com  E-mail address: (to be used for future annual report notification)  information concerning this matter, please call:  mpton  Name of Person  P54 326-2200  Area Code  Daytime Telephone Number  is a check for the following amount:  Filing Fee \$\Begin{array}cccccccccccccccccccccccccccccccccc		
For fur	ther information o	oncerning this matter, please o	all:	
Contis !	lesmotom		at ()	
	Name of	f Person	Area Code Daytime	Telephone Number
Enclose	ed is a check for th	c following amount:		
□ \$25	5.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy.

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FII ED &

2022 NOV -9 PM 4:03

Clear Solutions LLC

(Name of the Limited L

(A Florida	Launted Latishay Company)	
The Articles of Organization for this Limited Liability C	Company were filed on 10/04/2022	and assigned
Florida document number L22000427337	<u>_</u> .	
This amendment is submitted to amend the following.		
A. If amending name, enter the new name of the lim	ited liability company here:	
TUPARTI LLC		
The new name causa be distinguishable and contain the words "Lim	ited Liability Company," the designation "LLC"	or the abbrevization "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDI	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered	d office address on our records, <u>enter t</u>	the name of the new registered
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Exter Florida street address	
	Flo	
	City	Zip Code
New Registered Agent's Signature, if changing Registere	ed Agent:	
I hereby accept the appointment as registered agent provisions of all statutes relative to the proper and a accept the obligations of my position as registered a	complete performance of my duties, an	d I am familiar with and
being filed to merely reflect a change in the registered a company has been notified in writing of this change.	ed office address, I hereby confirm tha	t the limited liability

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	Membe

<u>Title</u>	Name	Address	Type of Action
			CJ Add
			□Remove
			□Add
			□Remove
			□Change
			□Remove
			□ Add
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	ation, enter change(s) here: (At	incer additional sneets, y neets.	sur y.,
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	st be specific and cannot be prior to date lock does not meet the applicable st		ing.) Pursuant to 605.0207
record specifies a delayed effective dis filed.	re date, but not an effective time, at	12:01 a.m. on the earlier of: (b)	The 90th day after the
Pated November 9th	2022		
	Signature of a member or authorized re	epresentative of a member	