

L23000274680

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

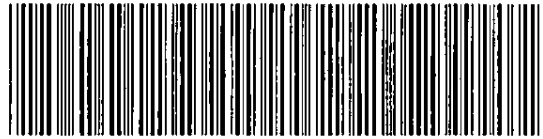
(Document Number)

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07/11/23--01021--013 \*\*30.00

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: \_\_\_\_\_

WAY UP Records LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Renaldo Black

Name of Person

WAY UP Records LLC

Firm/Company

7969 NW 2nd Street #1270

Address

miami, FL 33126

City/State and Zip Code

Renaldo.Black17@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Renaldo Black

Name of Person

at (954) 806-3659

Area Code

Daytime Telephone Number

Enclosed is a check for the 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:

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**

WAY UP Records 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 06/06/2023 and assigned Florida document number L23000274680.

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)

7969 NW 2nd Street  
#1270 Miami, FL 33126  
United States

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

7969 NW 2nd Street  
#1270 Miami, FL 33126  
United States

**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:

Renealdo Black

New Registered Office Address:

7969 NW 2nd Street #1270  
Enter Florida street address

Miami Florida 33126  
City Zip 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.*

Renealdo Black  
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>	<u>Address</u>	<u>Type of Action</u>
MGR	Regan Black	7969 NW 2nd Street	<input checked="" type="checkbox"/> Add
		#1270 miami, FL 33126	<input type="checkbox"/> Remove
		united states	<input type="checkbox"/> Change
MGR	Regan Black	26460 SW 142nd	<input type="checkbox"/> Add
		Ave Homestead, FL	<input checked="" type="checkbox"/> Remove
		33032	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record 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 record is filed.

Dated 07/07/2023 12:01 am

Renaldabhai

Signature of a member or authorized representative of a member

Rena ldo BLACK

Typed or printed name of signee

**Filing Fee: \$25.00**