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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Cubiq LLC
Name of Limited Liability Company
Dear Sir or Madam:
The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jorge Serguera Name of Person
Cubig LLC Firm/Company
Firm/Company
2356 W 80 SE Address
Address
Higlarh FL 33016
City/State and Zip Code
Jorge. Serguera @cub-iq.com Lemail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Jorge Serguera at (305) 846 - 1195 Name of Person Area Code & Daytime Telephone Number
Name of reison Area code & Daytime relephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Enclosed is a check for the following amount:
S25 Filing Fee S55 Filing Fee & Certified Copy
INHS18 (2/14)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

Name of the limited liability company:	cubiq LLC
2. (a) 2356 W 90 St	(b) 2003 Marseille Dr
Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS)	
Hialeah FL 33016	Miami Beach FL
	33141
4/6/2015	L 15000060056
3. Date of filing/registration in Florida	4. Document number
Serguera, Jorge Registered Agent and Registered Office shown on the records 8140 HW 74 th AV Registered Office Address (MUST BE FLORIDA STREET Suite 5 Medly (b) Serguera, Jor Enter name of NEW Registered Agent and/or NEW Registered	FL 33166 PM
2356 W 805t NEW Registered Office Address: Hialeah	Suite 5
	FL33016 claws of the State of Florida, it is hereby confirmed that after
the change or changes are hade, the Florida street address agent will be identical. Or in the case of a Florida limited was/were authorized by an iffirmative vote of the member the articles of organization or the operating agreement of the special process of the case of the member of the articles of organization or the operating agreement of the special process of the case of	s of the registered office and the business office of the registered d liability company, it is hereby confirmed that the change(s) are of the limited liability company or as otherwise provided in
Signature of a member or authorized representative of a member	• • • • • • • • • • • • • • • • • • • •
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and complethe obligations of my position as registered agent as provito merely reflect a change in the registered office address notified in writing of this change	agree to act in this capacity. I further agree to comply with the leie performance of my duties, and I am familiar with and accep, vided for in Chapter 605, F.S. Or, if this document is being filed s, I hereby confirm that the limited liability company has been
Signature of Registered Agent	