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COVER LETTER

TO: Registration Section Division of Corporations	
Cub.	a Entampiana 11.0
\	e Enterprises, LLC
Name of Li	mited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Of	fice Change and fee(s) are submitted for filing.
Please return all correspondence concerning the	nis matter to the following:
Jaime Z. Bendeck	
Name of Person	
Cube Enterprises, LLC	
Firm/Company	
16375 Miramar Parkway	
Address	
Miramar, FL 33027	
City/State and Zip Code	
•	
jaimezbn@yahoo.com E-mail address: (to be used for future annual report not	ification)
For further information concerning this matter	, please call:
Jaime Z. Bendeck	at (954) 242-9445
Name of Person	at (954) 242-9445 Area Code & Daytime Telephone Number
CERTIFICATION APPRICA	MAN DIG ADDDDGG
STREET/COURIER ADDRESS: Registration Section	MAILING ADDRESS: Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	
Enclosed is a check for the following	amount:
\$25 Filing Fee	\$55 Filing Fee & Certified Copy

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

Pursuant to the provisions of sections 608.416 or 608.508, 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.

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Name of the limited liability company:	Cube Enterprises, LLC	
2. (a) Principal office address of limited liability company	y: Cube Enterprises, LLC	<u> </u>
(Note: MUST BE STREET ADDRESS)	575 West 18th Street Hialeah, FL 33010	
(b) Mailing address of limited liability company:	Cube Enterprises, LLC	
(Note: MAY BE POST OFFICE BOX)	16375 Miramar Parkway Miramar, FL 33027	
October 6, 2008	L08000094673	
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on	the records of the Florida Dept. of State:	:
Registered Agent:	Harry B. Davis	
Registered Office Address:	Corporation Service Company 1201 Hays Street 7 Tallahassee, FL 32301	DIVISION DIVISION DIVISION DIVISION DIVISION DIVISION DIVISION DIVISIONI DI
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEV</u>	W Registered Office address:	FILED PRY DI
NEW Registered Agent:	Erick Cueto : 9	200
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Cube Enterprises, LLC 3301 SW 98th Avenue Miami ,FL3316	
If the limited liability company is not organized under the confirmed that after the change or changes are made, the F and the business office of the registered agent will be ident liability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member or authorized epresentative of a member Jaime Z. Bendeck Printed or typed name of signee I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the presentative to the presentative of a fixed provided the obligations of my possible to the presentative of a fixed provided to me address, I hereby confirm that the limited liability company	lorida street address of the registered off tical. Or, in the case of a Florida limited) was/were authorized by an affirmative wise provided in the articles of organiza	vote ation
address, Pheroby confirm that the limited liability company Signature of Registered Agent	y nas been notified in writing of this chai	nge.