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SECRETARY OF STATE
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## **COVER LETTER**

TO:

TO:	Registration Sec Division of Corp			
CUBII		Associates, LLC		
SUBJI	.c.:	Name of Lim	ited Liability Company	
The en	closed Articles of /	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspor	ndence concerning this matter	to the following:	
			Name of Person	· · · · · · · · · · · · · · · · · · ·
		ViJIEN Enterprises Corpor	ration	
			Firm/Company	<del></del>
		100 Commodore Drive, #5	26	
			Address	, description (1990)
		Plantation, FL 33325		7 <b>A</b> . 33.
		management@vijienenterpr	City/State and Zip Code ises.com	AUG CRETA
		E-mail address: (	to be used for future annual report notif	ication)
For fur	ther information co	ncerning this matter, please ca	all:	
Tomek	ca Napper	1	754 800-5372	2: 55 ORIDA ORIDA
	Name of	Person	Area Code Daytim	e Telephone Number
Enclos	ed is a check for th	e following amount:		
<b>□ \$</b> 2	5.00 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)
	Registra Division P.O. Bo	NG ADDRESS: ation Section of Corporations ox 6327 ssee FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Ce Tallahassee, FL 32	n ations nter Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

R. Cabrera & Associates, LLC					
(Name of the Limit	ed Liability Compa (A Florida Limited)	ny as it now appears on our rec Liability Company)	cords.)		
The Articles of Organization for this Limited Li Florida document number <u>L09000103073</u>	iability Company	were filed on 10/26/2009	and assigned		
Articles of Organization for this Limited Liability Company were filed on 10/26/2009 and assigned rida document number 109000103073 as amendment is submitted to amend the following:  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 "LLC." are new principal offices address, if applicable:  Incipal office address MUST BE A STREET ADDRESS)  Sunrise, FL 33323  The new mailing address, if applicable:  Incipal office address MAY BE A POST OFFICE BOX)  If amending the registered agent and/or registered office address on our records, enter the new registered office address here:  Name of New Registered Agent:  Villen Enterprises Corporation  Villen Enterprises Corporation  Villen Enterprises Corporation					
A. If amending name, enter the new name of	f the limited liab	ility company here:			
The new name must be distinguishable and contain the w	ords "Limited Liabi	lity Company," the designation "	LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:		1560 Sawgrass Corporate I	Parkway, 4th Floor		
(Principal office address MUST BE A STREE	T ADDRESS)	C FI 2222			
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered of registered agent and/or address here		c/o ViJIEN Enterprises Corporation  13762 W Stake Ad. 84 55 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5			
Name of New Registered Agent:	ViJIEN Enterp	rises Corporation			
New Registered Office Address:	100 Commodo	re Drive, #526  Enter Florida street ad	Uros		
	Plantation	द्यारत १ स्वायत आस्ट्रा स्व	Florida 33325		
		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.

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>	Address	Type of Action
MGR	Cabrera, Rigoberto	12550 Biscayne Blvd, Ste 800	Add
		PMB 150	<u>.</u> ₩-Remove
		North Miami, FL 33181	Change
MGR Napper, Tomeka	Napper, Tomeka	13762 U State Hd. 84#	F274 Add
		13762 U State Hd. 84# Daure, F1 33325-5304	Remove
		• • • • • • • • • • • • • • • • • • • •	Change
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effective date is listed, the date must be te: If the date inserted in this block ument's effective date on the Depar	specific and o does not mo	cannot be prior cet the applic	to date of fili able statuto	ng or more thar	90 days after i	iling.) Purst		
record specifies a delayed ef he 90th day after the record	fective da is filed.	ite <u>, but no</u>	t <u>an</u> effec	t <u>i</u> ve time,	at <u>12</u> :01 a	.m. on th	ne ear	lier o
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Filing Fee: \$25.00