L10000057042

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29HD JUN | 4 PM |:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Cube23	3, LLC			
(Name of the Limited Liability Compar (A Florida Limited L	i <mark>v as it now appear</mark> iability Company)	s on our records.)	
The Articles of Organization for this Limited Liability Company Florida document numberL10000057042		05/26/2010		igned
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liab	ility company her	e: ;	·	
The new name must be distinguishable and end with the words "Limit "L.L.C."	ted Liability Compa	iny," the designation	on "LLC" or the a	ibbreviation
Enter new principal offices address, if applicable:	1509 GRA	ADUATE CT.		
(Principal office address MUST BE A STREET ADDRESS)	LEHIGH F	CRES, FL	33971	· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			20 B JUN 4 PM II	
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here Name of New Registered Agent:		our records, <u>en</u>	ter the name o	f the new
New Registered Office Address:	En	ter Florida street	t address*	
	Florida		· · · · · · · · · · · · · · · · · · ·	
New Registered Agent's Signature. if changing Registered Agent:	City	•	Zip Code	?
I hereby accept the appointment as registered agent and agree the provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as publing filed to merely reflect a change in the registered office company has been notified in writing of this change. If Change	lete performance provided for in CF address, I hereby	of my duties, an hapter 608, F.S.	nd I am familiar Or, if this docume limited liabili	with and ument is ity

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGRM	Derek Anderson	1509 Graduate Ct. LEHIGH ACRES, FL 33971	✓ Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
	**************************************		Add Remove
D. If amen	ding any other information, enter	change(s) here: (Attach additional sheets, if nece	ssary.)
			ZOH JUN IL PH I: 15
Dated			<u>**</u> 67
	Signature of a	member or authorized representative of a member James Hammond Typed or printed name of signee	

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