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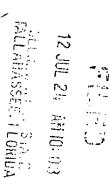
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SECRETARY OF STATE



B. BOSTICK

JUL **25** 2012

EXAMINER

COVER LETTER

TO:	Registration S Division of Co			
SUBJECT: Kuba & Sa			ba Properties, LLC	
			ited Liability Company	_
The en	iclosed Articles of	Amendment and fee(s) are su	bmitted for filing.	
Please	return all corresp	ondence concerning this matte	r to the following:	
J. Lu		J. Lu	cas Koberda, M.D., Ph.D.	_
		Kuba	a & Saba Properties, LLC	_
			P.O. Box 13554	
		1	allahassee, FL 32317	a 24
			City/State and Zip Code	12 J
For fu	rther information	E-mail address: concerning this matter, please	(to be used for future annual report notification)	12 JUL 21. LLAHASSEL
		as Koberda, M.D.	at (850) 877-2802	mbet RIDA
	Name	of Person	Area Code & Daytime Telephone Nu	mber NIIA
Enclos	sed is a check for	the following amount:		
√ \$2:	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy Cert (additional copy is enclosed) Cert	0 Filing Fee, ificate of Status & cified Copy litional copy is enclosed)
Registration Secti		ion of Corporations Box 6327	STREET/COURIER ADDRES Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	S:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Kuba & Saba Properties, LLC A FLORIDA LIMITED LIABILITY COMPANY

The Articles of Organization for this Limited Liability Company were filed on July 17, 2012 and assigned Florida document number L12000092663.

This amendment is submitted to amend the following:

<u>Title:</u> Managing Member

Ţ

Name and Address:
Małgorzata Koberda
4838 Kerry Forest Parkway
Tallahassee, FL 32309

Type of Action
Remove

Dated the 23 day of July, 2012.

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

J. Lucas Koberda

Name of Signee