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| equestor's Name) | |
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| ty/State/Zip/Phone | e#) |
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| usiness Entity Nar | me) |
| ocument Number) | |
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| Filing Officer: | |
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COVER LETTER

| TO: | Registration Se Division of Cor | | | |
|---------------|------------------------------------|--|---|--|
| CUBIC | | VESTMENTS LLC | | |
| SUBJE | CT: | Name of Lim | ited Liability Company | |
| The end | closed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please r | return all correspo | ndence concerning this matter | to the following: | |
| | | JASON MARTINS | | |
| | | ······ | Name of Person | |
| | | PIRITA PROPERTIES | | |
| | | | Firm/Company | |
| | | 2918 JACKSON STREET | #3 | |
| | | | Address | |
| | | HOLLYWOOD, FLORID | A 33020 | |
| | | | City/State and Zip Code | |
| | | MARTINS.JASON@YAH | | |
| | | | to be used for future annual report notifi | cation) |
| For furt | ther information c | oncerning this matter, please co | all: | |
| JASON | N MARTINS | | 954 729-3564 at () | |
| | Name o | f Person | | Telephone Number |
| Enclose | ed is a check for the | ne following amount: | | |
| = \$25 | 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) |

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| PIRITA INVESTMENTS LLC | | | |
|--|--|---|---------------------------------------|
| (Name of the Limit | ted Liability Compa (A Florida Limited) | ny as it now appears on our records.) Liability Company) | |
| The Articles of Organization for this Limited L | iability Company | were filed on <u>02/10/2014</u> | and assigned |
| This amendment is submitted to amend the foll | owing: | | |
| A. If amending name, <u>enter the new name o</u> | f the limited liab | ility company here: | |
| PIRITA INVESTMENT & PROPERTY MANAG | EMENT LLC | | |
| The new name must be distinguishable and contain the v | vords "Limited Liabi | lity Company," the designation "LLC" or th | e abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | | 1601 NW 73RD WAY | |
| · · · · · · · · · · · · · · · · · · · | | HOLLYWOOD, FLORIDA 33024 | · · · · · · · · · · · · · · · · · · · |
| | <u> </u> | | 26 6 |
| | | | 1 1 1 1 1 |
| Enter new mailing address, if applicable: | | 335 GEORGIA STREET #9 | |
| Mailing address MAY BE A POST OFFICE | HOLLYWOOD PLONIDA 22010 | | |
| | | | 70 75 |
| | | | XXX F |
| B. If amending the registered agent and registered agent and/or the new registered o | • | · • | er the name of the |
| Name of New Registered Agent: | ERIN MARV | ASTI | |
| New Registered Office Address: | 1601 NW 73R | D WAY | |
| | <u></u> | Enter Florida street address | |
| | HOLLYWOO | D, Florida | 33024 |
| | | 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 = M $AMBR = A$ | anager uthorized Member | | |
|--------------------|----------------------------|--|---------------------------------------|
| <u>Title</u> | <u>Name</u> | <u>Address</u> | Type of Action |
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| E. Effective date, if other than the date of filing: | er filing.) Pursuant to 605.0207 (3 is date will not be listed as th |
| | |
| Dated APRIL 30 , 2016 . | |
| | |
| Signature of a member or authorized representative of a member | <u> </u> |
| Signature of a member or authorized representative of a member | CART AY |
| Signature of a member or authorized representative of a member ERIN MARVASTI Typed or printed name of signee | CARE AND |
| Signature of a member or authorized representative of a member ERIN MARVASTI | LAHAN - |