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COVER LETTER

	Registration Sec Division of Corp			
CUBICO		Orlando LLC		
SUBJEC	1:	Name of Limi	ted Liability Company	
The enclo	osed Articles of	Amendment and fee(s) are subr	mitted for filing.	
Please re	turn all correspo	ndence concerning this matter	to the following:	
		Johnathan Tillman		
		Island Time Orlando	Name of Person	
		712 E Washington Street	Firm/Company	
		Orlando, Florida, 32801	Address	
		chefdevon247@gmail.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report	notification)
For furth	er information c	oncerning this matter, please ca	alt:	
Johnatha	n Tillman		407 443-918 at ()	
	Name o	f Person	Area Code Da	ytime Telephone Number
Enclosed	l is a check for th	he following amount:		
\$25.0	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

(Name of the Limi	ted Liability Company as it now app (A Florida Limited Liability Compan	ears on our records.) y)
The Articles of Organization for this Limited L Florida document number L14000120092	iability Company were filed on	07/31/2014 and assigned
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name of	of the limited liability company	here:
The new name must be distinguishable and contain the	words "Limited Liability Company," th	ne designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
Principal office address MUST BE A STRE	ET ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE) B. If amending the registered agent and registered agent and/or the new registered of the new	l/or registered office address	on our records, enfer the same of the
Name of New Registered Agent:	Johnathan Tillman	
New Registered Office Address:	712 E Washington Street	Florida street address
	Orlando	, Florida ³²⁸⁰¹
		, Florida ===== 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

Dogg 1 of 3

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	Johnathan Tillman	712 E Washington St, Orlando, FL 32801	■ Add
			☐ Remove
			□ Change
MGR	Andrew Anderson	712 E Washington St, Orlando, FL 32801	
			□ Remove
			Change
			D Add
			□ Remove
			Change
			Remove
		<u> </u>	Change
			Add
			□ Remove
			☐ Change
			□ Add
			□ Remove
			□ Change

•	
	7/1/2019
(If an o	ctive date, if other than the date of filing:
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Date	d 9/9, 2019.
	Signature of a member or authorized representative of a member
	a manor of administrative of a memori
	Audrey Davila