

L15000024647

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

AUG 10 2015

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## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** CUBIK LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MANUEL MARTINEZ  
Name of Person  
CUBIK LLC  
Firm/Company  
2010 NW 184TH ST  
Address  
MIAMI GARDENS, FL 33056  
City/State and Zip Code  
CS@411TAXES.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

MANUEL MARTINEZ  
Name of Person  
305 790-1040  
at ( )  
Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

CUBIK LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 02/09/2015 and assigned  
Florida document number L15000024647.

This amendment is submitted to amend the following:

**A. 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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2010 NW 184TH ST  
MIAMI GARDENS, FL 33056

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CLERK OF STATE  
TALLAHASSEE, FLORIDA

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent: 411TAXES.COM LLC (MARCIA C. CARDENTY)

New Registered Office Address: 1165 W 49TH ST STE 209

*Enter Florida street address*

HIALEAH

*City*

, Florida 33012

*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>	<u>Address</u>	<u>Type of Action</u>
MGR	MARCOS A. DIAZ	2010 NW 184TH ST	<input checked="" type="checkbox"/> Add
		MIAMI GARDENS, FL 33056	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
5 AUG 10 PM 2:29  
2010

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

15 AUG 10 PM 2:39  
SECRETARY OF STATE  
WASHINGTON, FLORIDA

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated August 6, 2015

Signature of a member or authorized representative of a member

MANUEL MARTINEZ

Typed or printed name of signee

**FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS****Detail by Entity Name****Florida Limited Liability Company**

CUBIK LLC

**Filing Information**

Document Number	L15000024647
FEI/EIN Number	NO-NE
Date Filed	02/10/2015
Effective Date	02/09/2015
State	FL
Status	ACTIVE

**Principal Address**

55 SE 6TH STREET  
1702  
MIAMI, FL 33131

**Mailing Address**

55 SE 6TH STREET  
1702  
MIAMI, FL 33131

**Registered Agent Name & Address**

MARTINEZ, MANUEL  
55 SE 6TH STREET  
1702  
MIAMI, FL 33131

**Authorized Person(s) Detail****Name & Address**

Title MGM

MARTINEZ, MANUEL  
55 SE 6TH STREET UNIT 1702  
MIAMI, FL 33131

**Annual Reports****No Annual Reports Filed****Document Images**

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