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## **COVER LETTER**

то:					
CUBIC	CT.	FIRST RAT	TE HOLDINGS, LLC		
SORTE	CI:		Name of Lim	ited Liability Company	
				-	
			ATE HOLDINGS, LLC  Name of Limited Liability Company  f Amendment and fee(s) are submitted for filing.  condence concerning this matter to the following:  Craig Smith  Name of Person  Firm/Company  1410 SW 3rd St  Address  Pompano Beach, FL 33069  City/State and Zip Code  c.smithcypress@gmail.com  E-mail address: (to be used for future annual report notification)  concerning this matter, please call:  at (  Area Code Daytime Telephone Number		
Division of Corporations    FIRST RATE HOLDINGS, LLC					
				Firm/Company	
			1410 SW 3rd St		
			Pompano Beach, FL 33069		
			c.smithcypress@gmail.com	•	
			E-mail address: (	to be used for future annual report noti	ification)
For furt	her in	formation co	oncerning this matter, please ca	all:	
Trisha S	Santo	s			
		Name of	f Person	Area Code Daytim	e Telephone Number
Enclose	d is a	check for th	ne following amount:		
\$25	.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
		MAIL	ING ADDRESS:	STREET/COUR	IER ADDRESS:

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

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

## FIRST RATE HOLDINGS, LLC /Nome of the Limited Liability Co

(A Florida Limited I.	iability Company)	
The Articles of Organization for this Limited Liability Company Florida document number $\underline{^{L15000044694}}$ .	were filed on 3/11/2015 and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabi	lity company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the abbreviation "L.L.C."	-
Enter new principal offices address, if applicable:	101 NE 3rd Ave	
(Principal office address MUST BE A STREET ADDRESS)	Suite 1500	_
Fort Lauderdale, FL 33301	_	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	101 NE 3rd Ave Suite 1500	<del></del>
	Fort Lauderdale, FL 33301	of the new
	Enter Florida street address  Florida  Florida	<u>new</u>
Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  City  City	City Sip 66tle	
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>	Name	Address	Type of Action
AMBR	Craig Smith	1410 SW 3rd St	
		Pompano Beach, FL 33069	□ Remove
		<del> </del>	□ Change
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Signature of a member or authorized representative of a member		/////	er or authorize	d representative	of a member			

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Filing Fee: \$25.00