L16000210513

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2023 JUL 17 AM 7: 28
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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Cor	porations		,	
CUBICT.	DOMINGO II	NVESTMENT LLC		
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	JORGE L. GONZALEZ			
		Name of Person		
	DOMINGO INVESTMEN	TT LLC		
		Firm/Company		
	961 SW 122 AVE			
DOMINGO INVESTMENT LLC Name of Limited Liability Company				
	MIAMI, FL 33184			
	-	City/State and Zip Code		
	_			
	E-mail address: (to be used for future annual report not	ification)	
For further information c	oncerning this matter, please ca	all:		
JORGE L. GONZALEZ		305 965-2486		
Name o	f Person	Area Code Daytin	ne Telephone Number	
Enclosed is a check for the	ne following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee &	Certified Copy	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
			ection	
_				

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2023 JUL 17 AM 7: 28

DOMINGO INVES	TMENT LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now apper Liability Company)	ars on our records.	TETARY OF STATE
The Articles of Organization for this Limited Liability Company	were filed on _	06/30/2023	and assigned
Florida document numberL16000210513			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company h	iere:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the	designation "LLC" or the	e 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)			
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	address on our	records, <u>enter the n</u>	ame of the new registered
New Registered Office Address:			
new Registered Office Fluidess.	Enter Flo	orida street address	
		, Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agre- provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance o provided for in	f my duties, and I a Chapter 605, F.S. (m familiar with and Or, if this document is

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>	Type of Action
MGR JOSE A. DOMINGUEZ	JOSE A. DOMINGUEZ	6900 SW 27 CT	□Add
		MIRAMAR, FL 33023	≣Remove
			□Change
MGR OFELIA M. MESTRE UNCAL	OFELIA M. MESTRE UNCAL	961 SW 122 AVE	≡ Add
	MIAMI, FL 33184	□Remove	
			□ Change
	.		□Add
		.	□Remove
			□Add
			□Remove
			□Change
			□Add
		-	□Remove
			Change
			□Add
			□Remove
			□Change

	ending any other information, enter change(s) here: (Attach additional sheets. if necessary.)
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ffect	ive date, if other than the date of filing:(optional)
an cfi lote:	fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
	nent's effective date on the Department of State's records.
recor I is fi	d 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 led.
ated	June 30 2023
	Signature of a member or authorized representative of a member
	Signature to a member of authorized representative of a member

Filing Fee: \$25.00