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UUVER LETTER

	gistration Sec vision of Corp		٠		
CUBICA.		PLANET LLC			
2087ECL:			ited Liability Company		·
The enclosed	d Anicles of A	umendment and fee(s) are sub-	mitted for filing.		
Please return	all correspor	dence concerning this matter	to the following:		
		ANTHONY BERTOLINA			
		PARADISE PLANET LLC	Name of Person		
		7763 W. Galdes Rd #202	Firm/Company		
		Boca Raton FL 33434	Address		
		sales@paradisePlanet.us	City/State and Zip Code		
		E-mail address: (t	o be used for future annual r	report notification	n)
For further in	nformation co	nceming this matter, please ca	all:		
Anthony Be	rtolina		954 865 at ()	5-0505	
	Name of	Person	Area Code	Daytime Telep	phone Number
Enclosed is a	check for the	e following amount:			
■ \$25.00 l·	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is encl		□ \$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 ORGANIZATION OF

PARADISE PLANET LLC	
(Name of the Limited Liability Company (A Florida Limited Lia	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company w	were filed on 6/13/17 and assigned
Florida document number 82-1931554	
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liabil</u>	ity company here:
The new name must be distinguishable and contain the words "Limited Liability	
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	- 2 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
	—————————————————————————————————————
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX	उंट क
3. If amending the registered agent and/or registered offi eqistered agent and/or the new registered office address here:	ice address on our records, enter the name of the
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	Florida
	City Zin 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

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	KATE BERTOLINA	7763 W. Glades Rd #202 Boca Raton FL 33434	⊟ Add
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Page 3 of 3

Filing Fee: \$25.00