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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : AGI REGISTERED AGENTS, INC.

Account Number : 120000000205 Phone : (305)416-6800 Fax Number : (305)416-6811

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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COVER LETTER

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TO:		istration Se sion of Cor						
CUBIE		Gigaestate,	LLC					
SUBJE	CII		Name of Lim	ited Liability Company			99. ———————————————————————————————————	
The enc	losed	Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please re	etum	all correspo	ndence concerning this matter	to the following:				
			Jose M. de la O					
		Name of Person				-		
			AGI Registered Agents, In	c.				
				Firm/Company	·	-		
			1000 Britckell Ave., Suite	300		٠,	•	
			Address			_ <u>#</u> :) 1019	
			Miami, FL 33131			AHAS ATAR	FEB I	``;
			josc@agi-ra.com	City/State and Zip Code	•	SEE, FLORI	– A	I T
			E-mail address: (to be used for future annual report notifi	cation)	10.12 41.S	<u>ب</u>	C
For fert	her in	formation c	oncerning this matter, please c	all:		20. 20.	=	
Jose M.	de la	0		305 416-6800		i		
		Name o	f Person	at ()	Telephone Numbe	r		
Enclose	d is a	check for th	ne following amount:					
\$25	.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ite of Sta	tus &	
		MAIL	ING ADDRESS:	STREET/COURIE	R ADDRESS:			

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

Registration Section Division of Corporations Clifton Building

2661 Executive Center Circle Tallahassec, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

(((H19000048064 3)))

(Name of the Limited Liability Company (A Florida Limited Lia	y as it now appears on our reco ability Company)	<u>ords.</u>)
The Articles of Organization for this Limited Liability Company was lorida document number L17000249219	vere filed on 12/05/2017	and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
he new name must be distinguishable and contain the words "Limited Liabilit	ry Company," the designation "L	.LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		2019
		AS B
Inter new mailing address, if applicable:		SE 38
Mailing address MAY BE A POST OFFICE BOX)		DF A
Maning address MAT BE AT OST OFFICE BOAY		<u> </u>
3. If amending the registered agent and/or registered off registered agent and/or the new registered office address here Name of New Registered Agent:		rds, enter the name of the 1
,		41-21
New Registered Office Address:	Enter Florida street ad	dress
		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 p accept the obligations of my position as registered agent as p	performance of my duties rovided for in Chapter 60	, and I am familiar with and

If Changing Registered Agent, Signature of New Registered Agent

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

$MGR = M$ $AMBR = \Lambda$	anager uthorized Member		(((H1900004)	5004 3)))
Title	<u>Name</u>	Address		Type of Action
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		MIAMI, FL 33129		_ = Remove
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cument's effective date on the I	epartment of Sta	ate's records.					
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February 11,		2019					
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· ~ /	Signature of a m	ember or author	ized representative	of a member			

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