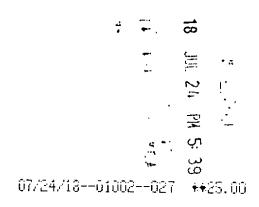
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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only





S. PRATHER

COVER LETTER

TO: Registrat	tion Sectior of Corpora			
SUBJECT:	CABEX L	_C		
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed Artic	eles of Ame	ndment and fee(s) are sub	mitted for filing.	
		ce concerning this matter	_	
		M	ARCELA BOTTINELLI	
	_		Name of Person	
		M87	CORPORATE SERVICE	ES LLC
	_		Firm/Company	
	_	777	BRICKELL AVE SUITE 1:	210
			Address	
	_		MIAMI, FL 33131	
		MBO ⁻	City/State and Zip Code TTINELLI@UHY-MACHO.	.COM
	_	E-mail address: (to be used for future annual repo	ort notification)
For further informa	ation conce	ning this matter, please ca	all:	
MARCE	LA BOTTII	VELLI	305 503-2	7700
1	Name of Pers	on	Area Code	Daytime Telephone Number
Enclosed is a check	k for the fol	lowing amount:		
■ \$25.00 Filing !	Fec 🗆	\$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	Sel) \$60.00 Filing Fee, Certificate of Status of Certified Copy (additional copy is enclose
Ī	Registration		Registration	
i	Division of P.O. Box 63 Fallahassec,		Clifton Build	Corporations ding tive Center Circle

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	CABEX LLC		; <u> </u>	
(Name of the Lim	ited Liability Company as it now appear (A Florida Limited Liability Company)	rs on our records.)		Ŧ
The Articles of Organization for this Limited L	iability Company were filed on	06/05/2018	and assigne	d.
Florida document numberL18000139758	·			
This amendment is submitted to amend the fol	lowing:		ν ω ν ω	
A. If amending name, enter the new name of	of the limited liability company he	ere:		
he new name must be distinguishable and contain the	words "Limited Liability Company," the d	lesignation "LLC" or	the abbreviation "L.L.C."	.4
Enter new principal offices address, if appli	rable			
• •				
<u>Principal office address MUST BE A STREI</u>	ET ADDRESS)			
Enter new mailing address, if applicable:				
Mailing address MAY <u>BE A POST OFFICE</u>	BOX)			
		_		
3. If amending the registered agent and	Var registered office address on	our records ei	ster the name of t	he
egistered agent and/or the new registered of	<u> </u>	our records, <u>cr</u>	ner the name or t	110
Name of New Registered Agent:	MB7 CORPORATE SERVICES	SLLC		
New Registered Office Address:	777 BRICKELL AVE SUITE 12	10		
	Enter Flor	rida street address		
	МІАМІ	, Florid	, 33131	
	City	1	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

Page 1 of 3

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>	Address	Type of Action
MGR	CLAUDIO SALERNO		
		4001 S OCEAN DR APT 4E HO	■ Remove
			☐ Change
MGR	ELSA MARIA RUBIO	4001 S OCEAN DR APT 4E HC	
			Remove
			□ Change
			Remove
			☐ Change
			Add
			Remove
			Add
			☐ Remove
			☐ Change
		 	□ Add
			Remove
			Change

an effective 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 605.02 tote: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a ocument's effective date on the Department of State's records. e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier. The 90th day after the record is filed.		······································		
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Filing Fee: \$25.00