3/27/23, 4:54 PM



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To:

Division of Corporations

Fax Number : (850)617-6383

from:

Account Name : DELEN ACCOUNTING SERVICES, INC

Account Number : 120120000052 Phone : (305)591-9180 Fax Number : (305)591-9167

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

Email Address: 1100/12/12/12/12/12

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN KUBICAL, LLC

Certificate of Status Certified Copy Page Count 04 Estimated Charge \$25.00

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Help

ARTICLES OF AMENDMENT, TO ARTICLES OF ORGANIZATION OF

KUBICAL; LLC	<i>!</i>		
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our recoults.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number Li 9000070428	y were filed on 03/12/2019	6	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ollity company here:		
The new name must be distinguishable and contain the words "Limited Liabi	thty Company," the designation "LLA," or the	abbrevia	tion "L.L.C."
Enter new principal offices address, if applicable:	801 BRICKELL KEY BLVD		
(Principal office address MUST BE A STREET ADDRESS)	UNIT 2401		
	MIAMI, FL 33131		
Enter new mailing address, if applicable:	801 BRICKELL KEY BLVD		
(Mailing address MAY BE A POST OFFICE BOX)	UNIT 2401		
	MIAMI, FL 33131		
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:		ne of th	2023w register
Name of New Registered Agent:		-	-a (1
New Registered Office Address:		.~ .~_	:¥: 1>>
	Enter Florida street address		09
	, Florida		
	Cuy	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 695, 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.

Mar 27 2023 04:43PM Jelen Accounting 3055919167

page 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
AMBR	JOSE J PALLARES	801 BRICKELL KEY BLVD	£∃Add
		UNIT 2401	
		MIAMI, FL 33121	
AMBR	JAVIER PALLARES	801 BRICKELL KEY BLVD	
		UNIT 2401	
		MIAMI, FL 33131	
AMBR	ESTEBAN PALLARES	801 BRICKELL KEY BLVD	□Add
		UNIT 240}	
		MIAMI, FL 33131	
MGR JO	JOSE J PALLARES	801 BRICKELL KEY BLVD	
		UNIT 2401	_
		MIAMI, FL 33131	
			-
			□Remove
			□ Change
	······································		□Add
			☐Remove

	a 210		
ated MARCH 27	2023		
record specifies a delayed effective 1 is filed.	date, but not an offective time, a	it 12:01 a.m. on the ear	rlies of: (b) The 90th day after the
iote: If the date inserted in this bid ocument's effective date on the De	ck does not meet the applicable.	statutory filing require	ments, this date will not be listed as
ffective date, if other than the	date of filing:be specific and cannot be prior to da	e of filing or more than 90	(outional) devs after fiting.) Pursuant to 605 020
191.1.1.1			