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(((H20000260721 3)))



H200002607213ABCU

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : CUBATAX & TRAVEL INC

Account Number : I20180000100

Phone

: (813)493-0199

Fax Number

: (813)354-2432

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

Email	Address:	
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN IBL COUNTER TOP LLC

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Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

AUG 1: 2020

COVER LETTER

г О :	Registration Sect Division of Corp		•	
		TER TOP LLC		
SUBJI	ECT:	Name of Limite	ed Liability Company	
		mendment and fee(s) are subm		
Please	return all correspon	dence concerning this matter to	the following:	
		ISBEL FLEITAS HERNAM	NDEZ	
			Name of Person	
			Firm/Company	
		600 N 70 TERRACE		
			Address	-
		HOLLYWOOD, FL 33024		
		IBL.COUNTERTOP@GMA	City/State and Zip Code	
		E-mail address: (t	o be used for future annual report notifi	cation)
For fi	urther information c	oncerning this matter, please ca	dl:	
ISBE	EL FLEITAS	·	720 2315012 at ()	
	Name o	f Person	Area Code Daytime	Telephone Number
Encle	osed is a check for the	he following amount:		
B :	\$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addre Registration Division of (P.O. Box 63 Tallahassee,	Section Corporations 27	Street Address: Registration Sec Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations allahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

I B L COUNTER TOP LLC (Name of the Limited Liability)	Company as it now appears on our records.) imited Liability Company)	
The Articles of Organization for this Limited Liability Cor Florida document number L20000213863		and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
TO A GOLDENTONE LLC		
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRE	<u> </u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		AND I
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	l office address on our records, <u>enter the</u>	e name of the new register
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flori	
	City	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.

2020-08-04 17:37:57 (GMT)

18133542432 From: KETYS RAMIREZ

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

AMBR = Au	thorized Member		
<u>Title</u>	Name	Address	Type of Action
			□Add
			Remove
			Change
			□Add
			[]Remove
			Change
			DbA□
			□ Remove
			□Remove
			Remove
			[] Change
			□Add
			□Remove
			☐ Change

ингеден-8	any other information, enter change(s) here: (Attach additional sheets, if necessary.)
_	
 _	
 -	
Mindae Ifth	ate, if other than the date of filing:
he record spe ord is filed.	cifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
JUL	Y 30 2020
Dated	and it
	Signature of member or authorized representative of a member

Filing Fee: \$25.00