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P.O. Box 6327

Tallahassee, FL 32314

	Registration So Division of Co				
SUBJEC	Add the re	gister agent as the authorize n	nember		
SUBJEC	.1.	Name of Lin	nited Liability Company		
The enclo	osed Articles of	Amendment and fee(s) are sul	omitted for filing.		
Please ret	turn all correspo	ondence concerning this matter	to the following:		
		Federme Richard			
			Name of Person		_
		Cubano exports LLc			
			Firm/Company		_
		280 ne 82nd st apt. 1			
			Address		_
		Miami , FL 33138			
			City/State and Zip Code		_
		richardfederme8@gmail.co			
			to be used for future annual re	eport notification)	202
For furthe	er information c	oncerning this is latter, please of	all:		2021 JUS
Federme	Richard		786 914- at ()	9335	
· -	Name o	f Person	Area Code	Daytime Telephone Number	T T
					:
Enclosed	is a check for th	ne following amount:			7
■ \$25.0	00 Filing Fec	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclo	Certifica (sed) Certified	ate of Status &
	Mailing Addres Registration S		<u>Street Ade</u> Registrat	iress:	
	Division of C			of Corporations	

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

C	U	В	A	Ν	О	EXI	οʻ	R	ΓS	LI	LC

(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 04/28/2021 and assigned Florida document number L21000198732 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited 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 ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered At ant: New Registered Office Address: Enter Florida street address

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 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	Federme Richard	280 ne 82nd street apt. 1 Miami FL 33168	= Add
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ective date, if other than the date of 1th ag:effective date is listed, the date must be specific and cannot be prior to date of fi	iling or more than 90 days	optional) after filing.) Pur	suant to 6	05.020
e: If the date inserted in this block does not meet the applicable statutument's effective date on the Department of State's records.	ory filing requirements	s, this date will	not be li	sted a
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cord specifies a delayed effective date, but not an effective time, at 12:0	01 a.m. on the earlier o	of: (b) The 90t	h day af	ter the
filed.			-	
, 05/19/2021				
ed				
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Signature of a member or authorized repre				