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(Re	equestor's Name)	
(Ac	ddress)	
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PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nar	ne)
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COVER LETTER

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	Registration S Division of Co			
CUBIEC		s Enterprises LLC		
SUBJEC	·!:	Name of Lim	ited Liability Company	
The enck	osed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all corresp	ondence concerning this matter	to the following:	
		Justin McConnell	Name of Person Firm/Company Address City/State and Zip Code be used for future annual report notification)	
			Name of Person	
		Bathworks Enterprises LL	С	
			Firm/Company	
		204 Hampton Station Blvc	I	
			Address	
		Canton, GA 30115		
			City/State and Zip Code	
		mjservices2019@gmail.com		
		E-mail address: (to be used for future annual report notificatio	n)
For furth	er information	concerning this matter, please c	all:	
Justin M	cConnell		_	
	Name	of Person		phone Number
Enclosed	is a check for	the following amount:		
■ \$25.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy
	Mailing Addre			
	Registration Division of (Section Corporations	-	tions
	P.O. Box 63			
	Tallahassee,	FL 32314	2415 N. Monroe Stro	eet, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 MAY 27 AM 8: 43

Bathworks Enterprises LLC

(Name of the Limited Liability Company as it now appears on our records.) ALL AHASSEE, FL

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Compar	ny were filed on April 05	, 2022 and assigned
Florida document number L22000162619		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designa	tion "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	e address on our record	s, enter the name of the new registered
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida str	Live Marie M
	Citv	, Florida Zip Code
New Registered Agent's Signature, if changing Registered Agen	•	inp som
I hereby accept the appointment as registered agent and agenovisions of all statutes relative to the proper and compleaccept the obligations of my position as registered agent a being filed to merely reflect a change in the registered officeompany has been notified in writing of this change.	gree to act in this capac te performance of my a s provided for in Chapt	uties, and I am familiar with and er 605, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

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	Madison Rybeck	204 Hampton Station Blvd	■ Add
		Canton, GA 30115	□Remove
			□ Change
			□ Add
			□Remove
			Change
			□Add
		□ Remove	
			□Change
			□ Add
			□ Remove
		*	
			□Add
			□Remove
			Change
	<u> </u>	****	□Add
			□Remove
			OC

Ownership portion should be divi	rided 34% to Madison Rybe	eck, 33% Ryan Goetz, ar	nd 33% Justin Mo	:Connell,	
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ective date is listed, the date must be s If the date inserted in this block of	specific and cannot be prior to does not meet the applicab				
d specifies a delayed effective dated.	te, but not an effective time	e, at 12:01 a.m. on the ca	arlier of: (b) The	e 90th day afte	r the
May 23rd	2022				
	ve date, if other than the date entire date is listed, the date must be lift the date inserted in this block ent's effective date on the Depart	ve date, if other than the date of filing:	ve date, if other than the date of filing:	ve date, if other than the date of filing: (optional) etive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing, if the date inserted in this block does not meet the applicable statutory filing requirements, this date ent's effective date on the Department of State's records.	ve date, if other than the date of filing:

Typed or printed name of signee

Justin McConnell /