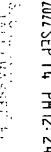
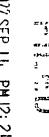
L22000376352

(Requestor's Name)	
(Address)	
	(Address)	 .
	City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
	Business Entity Name)	
(Document Number)	
Certified Copies	_ Certificates of S	Status
Special Instructions to	Filing Officer:	



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Office Use Only

(850) 524-6243 Please use funds from Account: I20210000160 Amount: \$_25.00_ Son Full-Authorization Signature: 2 S Hopkins 26300 LLC L22000376352 Document # Business Walk in Pick up time Will wait Mail out Photocopy Certified Copy (s) of Articles Certificate of Status **AMMENDMENTS NEW FILINGS** X Amendment Profit Resignation of R.A. Officer/Director Not for Profit Limited Liability Change of Registered Agent Dissolution/Withdrawal Domestication Merger Other Conversion CORP Articles of Conversion REGISTRATION/QUALIFICATIONS **OTHER FILINGS** Foreign filing Annual Report Limited Partnership _____Fictitious Name Reinstatement ARTICLES OF CORRECTION Other _APOSTIL() Country

. FLORIDA CAPITAL COURIER SERVICES, INC

2330 CLARE DRIVE

(850) 524-5437

TALLAHASSEE, FL 32309

EXAMINER'S INITIALS:

DocuSign Envelope ID: 8DE355BD-B211-46F1-AF1D-92DA3AAB921D COVER LETTER

TO:

	egistration Se livision of Cor					
CUBICCT	_	s 26300 LLC				
SUBJECT: Name of Limited Liability Company						
The enclos	ed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please retu	rn all correspo	ndence concerning this matter	to the following:			
		Rocio Bruni				
		· ·	Name of Person			
		Nishad Khan, P.L.				
			Firm/Company	·		
		1303 N. Orange Ave.				
			Address			
		Orlando, FL 32804				
			City/State and Zip Code			
		rocio@nishadkhanlaw.com				
For further	information c	E-mail address: (oncerning this matter, please c	to be used for future annual report no	ufication)		
		oncerning this matter, prease e				
Rocio Bru			407 228-9711 at ()	· · · · · · · · · · · · · · · · · · ·		
	Name o	f Person	Area Code Daytii	ne Telephone Number		
Enclosed is	s a check for th	ne following amount:				
\$25.00) Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	<u>failing Addres</u>		Street Address: Registration Se	ection		
Registration Section Division of Corporations		-	Division of Corporations			
P	O. Box 632	7	The Centre of			
Т	`allahassee, I	°L 32314	2415 N. Monro	oe Street, Suite 810		

Tallahassee, FL 32303

DocuSign Envelope ID: 8DE355BD-B211-46F1-AF1D-92DA3AAB921D

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

2 S Hopkins 26300 LLC

(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 8/26/2022 Florida document number 1.22000376352 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." 2 S Hopkins Ave., Titusville, FL 32796 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 Agent: 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.

City

DocuSign Envelope ID: 8DE3558D-B211-46F1-AF1D-92DA3AAB921D
IT amending Authorized rerson(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
AR	Nishad Khan	1303 N. Orange Ave., Orlando, FL 32804	□Add
			Remove
			□ Change
MGR	Nekpal Singh	2 S Hopkins Ave., Titusville, FL 32796	≡ Add
			□ Remove
			☐ Change
MGR	Randhir Singh	2 S Hopkins Ave., Titusville, FL 32796	Add
			□Remove
			□Change
			🗆 Add
			Remove
			☐ Change
			🗆 Add
			Remove
			Change
			□Add
			□ Remove
			□ Change

Business Purpose: The activities of this Company	are confined	exclusively to	the operation o	of one or mo	re 7-Elevei
in accordance with one or more 7-Eleven Store Fr	ranchise Agre	ements.			
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tive date, if other than the date of filing:			(op	tional)	
ffective date is listed, the date must be specific and cannot 1 If the date inserted in this block does not meet the	t be prior to date e applicable s	of filing or mon tatutory filing i	e than 90 days af requirements, t	ter filing.) Pu his date wil	rsuant to 605 I not be liste
ment's effective date on the Department of State's			·		
ord specifies a delayed effective date, but not an effe filed.	ective time, a	t 12:01 a.m. on	the earlier of:	(b) The 90	Ith day after
d September 13 202					
DocuSigned by: Niskal Khan					
Niskad Khan		representative of			

Typed or printed name of signee