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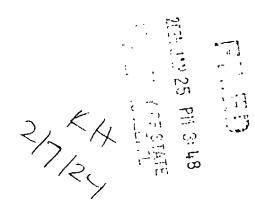
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COVER LETTER

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CUBICAT	Daluan Rai	ces LLC		
SUBJECT		Name of Lim	ited Liability Company	
The enclose	ed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please retu	n all correspo	ondence concerning this matter	to the following:	
		Gia Songur, Esq.		
			Name of Person	
		Monarch Law & Title LLC	:	
	Firm/Company			
		2151 Consulate Dr. Suite	4B	
Address				
		Orlando, FL 32837		
			City/State and Zip Code	
		gsongur@monarch-titleco.c		
For further	information c	E-mail address: (oncerning this matter, please c	to be used for future annual report notification) all:	
Gia Songu	<u>.</u>		407 377-5585	
		f Person	all: 407 377-5585 at (
Enclosed is	a check for th	he following amount:		
줄 \$25.00	Filing Fee	☐ \$30,00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) ☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	ailing Addres		Street Address: Registration Section	
		Section Torporations	Division of Corporations	
Р.	O. Box 632	2.7	The Centre of Tallahassee	
T	allahassee, l	FL 32314	2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Lim	nited Liability Company as it now appears o (A Florida Limited Liability Company)	n our records.)
The Articles of Organization for this Limited Florida document number L24000014404		
This amendment is submitted to amend the following	llowing:	
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 design	gnation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appl	icable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST <u>OFFIC</u>	E BOX)	
•		725
B. If amending the registered agent and/or agent and/or the new registered office addr	registered office address on our reco	ords, enter the name of the new register
agent unavor the new regions to only		P
Name of New Registered Agent:	Songur & Associates, PA	<u>ं िल छ</u>
New Registered Office Address:	2151 Consulate Dr Suite 14A	
	Enter Florida	street address
	Orlando	Florida 32837
	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.

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>	Name	Address	Type of Action
			🗆 Add
			🗀 Remove
			□ Change
			🗆 Add
			□Remove
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ted Janaury 23			Fhe 90th day after th