L2400013823

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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Div	ision of Corp	porations				
CUBICA		STORE LLC				
SUBJECT:		Name of Lim	ited Liability Company			
The enclosed	d Articles of a	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspon	ndence concerning this matter	to the following:			
		ROSEMARY MARKS				
		· · · ·	Name of Person			
RDM BOOKKEEPING SERVICE & CONSULTING CORP				,		
Firm/Company						
	2300 W SAMPLE RD STE 210					
	Address					
	POMPANO BEACH, FL 33073					
	City/State and Zip Code					
		rdmbookkeepingservice@g				
		E-mail address: (to be used for future annual report noti	fication)		
For further in	nformati <mark>on</mark> co	oncerning this matter, please co	all:			
ROSEMAR	Y MAR K S		781 443-2789			
Name of Person		Area Code Daytim	e Telephone Number			
Enclosed is a	a check for th	e following amount:				
≡ \$25.00 F	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)		
	iling Address gistration S		<u>Street Address:</u> Registration Se	ction		
Div	vision of C	orporations	Division of Cor	rporations		
P.O. Box 6327			The Centre of T	The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SOULFIT STORE LLC			
(Name of the Limi	ted Liability Company as it new appea (A Florida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited L. Lorida document number L.24000193823		and assigned	
his amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	of the limited liability company h	<u>ere</u> :	
he new name must be distinguishable and contain the venture of the new principal offices address, if applied		designation "LLC" or the abbreviation "L.L.C."	
• • •	<u> </u>		
<u>Principal office address MUST BE A STREI</u>	:T ADDRESS)		
Inter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE	<u></u>		
3. If amending the registered agent and/or agent and/or the new registered office addre		ecords, enter the name of the new registe	
Name of New Registered Agent:	RDM BOOKKEEPING SERVICE & CONSULTING CORP		
New Registered Office Address:	2300 W SAMPLE RD STE 210		
	Enter Flo	rida street address	
	POMPANO BEACH	Florida 33073	
	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 Reds &

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	<u>Address</u>	Type of Action
MGR	IGOR GOMES FERREIRA	10693 N LAGO VISTA CIR	= Add
		PARKLAND, FL 33076 US	
MGR	PAOLA VALEIKO MOLINA	10693 N LAGO VISTA CIR	
		PARKLAND, FL 33076 US	Remove
			□Change
			□Remove
			Change
			□Aċd
			Remove
			□Change
			□ Remove
			□Change
			□ Add
			□Remove

				
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ective date, if other than the effective date is listed, the date is listed in this unsent is effective date on the date.	must be specific and cannot be s block does not meet the a	applicable statutory fil	(option: more than 90 days after fili ing requirements, this da	ng.) Pursuant to 605.0207
cord specifies a delayed effe s filed.	ctive date, but not an effect	tive time, at 12:01 a.m	n, on the earlier of: (b)	The 90th day after the
***	2024			
5/16				
ed	,	·		
ed 5/16				
* (fil		r authorized representati	ve of a member	

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