oath; that I am a managing member or manager of the limited liability company or the receiver or trus		
that my name appears above, or on an attachment with all other like empowered.		
SIGNATURE: EDDY BARIA	MANAGER	01/15/2024

MANAGER

Name	BARIA, EDDY
Address	14050 NW 6 CT
City-State-Zip:	MIAMI FL 33168

Title

Authorized Person(s) Detail :

Name and Address of Current Registered Agent:

BARIA, EDDY 14050 NW 6 CT NORTH MIAMI, FL 33168 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

		00	0	•	•	
SIGNATURE:	EDDY BARIA					01/15
	Electronic Signature of Registered A	Agent				Da

Electronic Signature of Signing Authorized Person(s) Detail

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under 0 ť

Entity Name: NEIGHBORHOOD CUBE 2 LLC.

Current Principal Place of Business:

14050 NW 6 CT NORTH MIAMI. FL 33168

Current Mailing Address:

DOCUMENT# L18000290743

14050 NW 6 CT NORTH MIAMI, FL 33168 US

FEI Number: 83-2892892

FILED Jan 15, 2024

Secretary of State

6221789057CC

Certificate of Status Desired: No

5/2024 Date

Date

2024 FLORIDA LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT