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TO:

CR2E062 (9/15)

Registration Section

Division of Corporations OPPER/ROSENBERG, L.L.C. SUBJECT: Name of Limited Liability Company Dear Sir or Madam: The enclosed Statement of Correction and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: STEPHEN ROSENBERG Name of Person Firm/Company 1010 LAKE DAVIS DR Address ORLANDO FL 32806 City/State and Zip Code STRDOC CGMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Daytime Telephone Number Name of Person Street Address: Mailing Address: Registration Section Registration Section Division of Corporations **Division of Corporations** The Centre of Tallahassee P.O. Box 6327 Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 Enclosed is a check for the following amount: □\$55 Filing Fee & ☐ \$60 Filing Fee, □\$25 Filing Fee ☐ \$30 Filing Fee & Certificate of Status & Certificate of Status Certified Copy Certified Copy

STATEMENT OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 605.0209, F.S., this document is being submitted to correct a previously filed document. FIRST: The name of the limited liability company is: ______OPPER/ROSENBERG, L.L.C. The Florida Document number of the limited liability company is: SECOND: 2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT Document to be corrected is: THIRD: (CHECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMENT Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected \Box statement are as follows: BEVERLY O. ROSENBERG died 8/6/2023 and should be removed as Registered Agent and Authorized Person The Registered Agent should be: STEPHEN ROSENBERG, 1010 Lake Davis Dr., Orlando, FL 32806 OR Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are (7) as follows: OR The electronic transmission of the regord was defective. 0 Signature of Authorized Representative Signature of new registered agent, if applicable :(NOTE: if correcting the registered agent, the new registered agent must sign accepting the designation). 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.

> Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)

Registered Agent's Signature