

41200024227

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

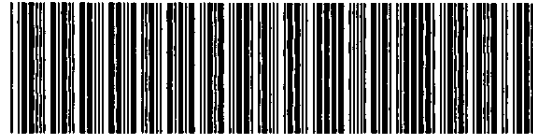
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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AND
FILED

12 DEC 17 PM 2:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE
DEC 18 2012
EXAMINER

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: **CORPORATION ROSEBARA USA LLC**

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joseph David Pena

Name of Person

Fowler Rodriguez Valdes-Fauli

Firm/Company

355 Alhambra Circle Suite 801

Address

Coral Gables FL 33134

City/State and Zip Code

dpena@frvf-law.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joseph David Pena

Name of Person

at **(786) 364-8400**

Area Code & Daytime Telephone Number

Enclosed is a check for the 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)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AND
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If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

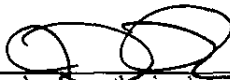
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Adelino Goncalvez	701 Brickell Avenue	<input type="checkbox"/> Add
		Suite 1650	<input checked="" type="checkbox"/> Remove
		Miami FL 33131	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated December 11, 2012.



Signature of a member or authorized representative of a member

Joseph David Peña

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA