L12000105953

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

JUN 07 2013
B. KOHR

700246643397

04/15/13--01020--011 **25.00

FILED
13 JUN -5 PM 2:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 16, 2013

JOHN O'MALLEY
ROPA POROPERTIES LLC
302 S. MYERS STREET, APT. G
OCEANSIDE, CA 92054

FILED
13 JUN -5 PM 2:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: ROPA PROPERTIES LLC
Ref. Number: L12000105953

We have received your document for ROPA PROPERTIES LLC and your check(s) totaling $25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The attached form must be completed in order to file the document.

Page 1 of 3 missing

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Barbara Bostick
Regulatory Specialist II

Letter Number: 613A00009044

COVER LETTER

TO: **Registration Section**
Division of Corporations

FILED
13 JUN -5 PM 2:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUBJECT: Ropa Properties 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:

John O'malley
Name of Person

Ropa Properties LLC
Firm/Company

302 S. Myers St. Apt G
Address

Oceanside, CA 92054
City/State and Zip Code

jromalley@netzero.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John O'malley at (909) 227-1792
Name of Person 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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
13 JUN -5 PM 2:05
TALLAHASSEE, FLORIDA

ROPA PROPERTIES LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 8/16/2013 and assigned Florida document number L12000105953.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:
Enter Florida street address

, **Florida**
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 608, 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 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

Title	Name	Address	Type of Action
MGR	John O'malley	2543 Vuelta Grande Ave Long Beach, CA 90815	☒ Add ☐ Remove
MGR	Robert Palma	302 S. Myers St Apt G Oceanside CA 92054	☐ Add ☒ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

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

Dated 4/11, 2013

x Robert Palma x John O'Malley

Signature of a member or authorized representative of a member

Robert Palma John O. Malley

Typed or printed name of signee

Filing Fee: $25.00