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SECRETARY OF STATE TALLAHASSEE, FLORIDA

APR 30 PM 12: 16

B. BOSTICK
MAY - 1 2013
EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	•	
SUBJECT: ROBACRIS LLC		
Name of Limited Liability C	Company	
Dear Sir or Madam:		
The enclosed Articles of Correction and fee(s) are submitted for filing	ıg.	
Please return all correspondence concerning this matter to the follow	ring:	
Graciela de la Rua		
ROBACRIS LLC		
6909 NW 50 TH ST Address		
Address	77	s
MIAMI, FL, 33166 City/State and Zip Code	SECRETARY OF STATE ALLAHASSEE, FLORID	5 5
	HAS	
E-mail address: (to be used for future annual report notification	SEE S	
E-mail address: (to be used for future annual report notification		<u> </u>
For further information concerning this matter, please call:	ECRETARY OF STATE LAHASSEE, FLORID!	المسادة
Graciela de la Rua at (SY) Name of Person Area	111, 43112684	
Name of Person Area	Code & Daytime Telephone Number	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the following amount:		
■ \$25 Filing Fee Certificate of Status	& □ \$60 Filing Fee, Certificate of Status & Certified Copy	

CR2E062 (08/05)

ARTICLES OF CORRECTION **FOR** FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

<u>FIRST</u>					
SECO	ND: The articles of organization or the application to transact business L1300	0057287			
<u>(CH</u>	<u>IECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STATEMEN</u>	<u>T</u>			
X	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows:				
	de la Rua Graciela Manager Manager	<u></u>			
	de la Rua Graciela Manager Manager Cappiello Maria Ines Member Manage Rillo Maria Cristina Member Manage	<u>d</u> <u>d</u>			
	<u>OR</u>				
	Was defectively signed. The manner in which the document was defectively signed and the appropriate correction are as follows:				
	E FLOR				
		<u>, </u>			
Dated:	4/24/13				
Signature of a member or authorized representative of a member					
Typed or printed name of signee					
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)				

Electronic Articles of Organization Florida Limited Liability Company

Article I

The name of the Limited Liability Company is: ROBACRIS LLC

Article II

The street address of the principal office of the Limited Liability Company is:

6909 NW 50 ST MIAMI, FL. 33166

The mailing address of the Limited Liability Company is:

6909 NW 50 ST MIAMI, FL. 33166

Article III

The purpose for which this Limited Liability Company is organized is: REAL ESTATE

Article IV

The name and Florida street address of the registered agent is:

GRACIELA E DE LA RUA 6909 NW 50 ST MIAMI, FL. 33166

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Registered Agent Signature: GRACIELA ESTHER DE LA RUA

Article V

The name and address of managing members/managers are:

Title: MGR GRACIELA E DE LA RUA 6909 NW 50 ST MIAMI, FL. 33166 US

Title: MGR MARIA I CAPPEILLO 6909 NW 50 ST MIAMI, FL. 33166 US

Title: MGR MARIA C RILLO 6909 NW 50 ST MIAMI, FL. 33166 US L13000057287 FILED 8:00 AM April 18, 2013 Sec. Of State bkohr

Article VI

The effective date for this Limited Liability Company shall be:

04/16/2013

Signature of member or an authorized representative of a member

Electronic Signature: GRACIELA ESTHER DE LA RUA

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

2013 APR 30 PM 12: 16