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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
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FLORIDA DEPARTMENT OF STATE Division of Corporations

February 3, 2014

CHARLES CAPO 3553 MORGANS BLUFF CT LAND O LAKES, FL 34639

SUBJECT: OPAC FLORIDA PROPERTIES LLC

Ref. Number: W14000006887

We have received your document for OPAC FLORIDA PROPERTIES LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date is not acceptable since it is not within five working days of the date of receipt.

Please return the corrected original and one copy of 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.

Letter Number: 514A00002353

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

www.sunbiz.org

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Opac Florida Properties
Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Charles Capo
Name of Person
Opac Florida Properties
Firm/Company
3553 Morgans Bluff Court
Address
Land O Lakes, Florida 34639
City/State and Zip Code
chuckcapofloridaproperties@gmail.com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Charles Capo Name of Person Name of Person Area Code Area Code Daytime Telephone Number
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ S130.00 Filing Fee \& Certificate of Status Certified Copy (additional copy is enclosed) \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Street/Courier Address

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

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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ARTICLE I - Name: The name of the Limited Liability Company is:	
Opac Florida Properties LLC	
(Must end with the words "L	Limited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3553 Morgans Bluff Court	3553 Morgans Bluff Court
Land O Lakes, Florida 34639	Land O Lakes, Flonda 34639
Carolyn Z625 K Florida street address (P. Tarpon Sp City	Name Leystone Kd. Site One P.O. Box NOT acceptable) Dings, FC 34688
the place designated in this certificate, I hereb capacity. I further agree to comply with the pro of my duties, and I am familiar with and accep Registered Agent	ccept service of process for the above stated limited liability company by accept the appointment as registered agent and agree to act in this positions of all statutes relating to the proper and complete performant of the obligations of my position as registered agent as provided for in Chapter 605, F.S. Signature (REQUIRED)

Page 1 of 2

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	Physica Cons
AMBR	Charles Capo 3553 Morgans Bluff Court
	Land O Lakes, Florida 34639
	Editi O Lates, Fishes Secus
MGR	Charles Capo
MIGR	3553 Morgans Bluff Court
	Land O Lakes, Florida, 34639
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(Use attachment if necessary)	3 /
LE V: Effective date, if other than the date of fective date is listed, the date must be spect of filing.)	of filing: 2-10-14 (OPTIONAL) eific and cannot be more than five business days prior to or 90
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LE V: Effective date, if other than the date of fective date is listed, the date must be spect of filing.) LE VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a men (In accordance with section 6)	mber or an authorized representative of a member.
LE V: Effective date, if other than the date of fective date is listed, the date must be spect of filing.) LE VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a men (In accordance with section 6 constitutes an affirmation unlarm aware that any false info	mber or an authorized representative of a member. 105.0203 (1) (b), Florida Statutes, the execution of this document of the penalties of perjury that the facts stated herein are true. 105.0203 to be perjury that the facts stated herein are true. 105.0203 to be perjury that the facts stated herein are true.
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Filing Fees:
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)