

OCT/08/2014/WED 09:36 AM

FAX No.

P. 002

L14000107702

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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(((H14000233869 3)))



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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
THE ROA GROUP LLC**

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ALLAHABAD, FLORIDA

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FAX No.

P. 001

10/7/2014 3:24:44 PM PAGE 1/001 Fax Server



October 7, 2014

FLORIDA DEPARTMENT OF STATE

Division of Corporations

EXPRESS CORPORATE FILING SERVICE INC.

SUBJECT: THE ROA GROUP LLC

REF: L14000107702

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

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.

Elliott R McCaskill
Registration Specialist II

FAX Aud. #: H14000233869
Letter Number: 814A00021435

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14 OCT -6 PM 3:51
TALLAHASSEE, FLORIDA

P.O. BOX 6327 - Tallahassee, Florida 32314

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

The ROA Group 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 6-19-2014 and assigned Florida document number 114000107702.

This amendment is submitted to amend the following:

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

THE ROA GROUP TRUST LLC

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

Enter new principal offices address, if applicable:

SAME
(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

SAME
(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:

SAME

New Registered Office Address:

Enter Florida street address

City

Florida

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 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.

N/A

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
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_____	_____	_____	<input type="checkbox"/> Remove

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

N/A

Dated October 06, 2014.


Signature of a member or authorized representative of a member

Jacqueline Oide
Typed or printed name of signer

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ATTORNEY GENERAL
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