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From:

Account Name : SALVER & COOK LLP

Account Number : I20220000199

Phone : (954)389-1333

Fax Number

: (954)389-1397

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S. RUBERTS

JUN 1 4 2023

COVER LETTER

	gistration Sci vision of Corp		
in incr	ROPAVA L	.LC	
BJECT:		Name of Lin	nited Liability Company
e enclose	d Articles of	Amondment and fee(s) are sub	pmitted for filing.
ase retur	n ali correspo	ndence concerning this matter	to the following:
		Daniella Santana	
			Name of Person
		Salver & Cook LLP	
			Firm/Company
		2721 Executive Park Drive	c, Suite 4
			Address
		Weston/Florida 33327	
		d.santona@psccpas.com	City/State and Zip Code
			(to be used for future annual report notification)
or further	information c	oncerning this matter, please c	ali:
Danicila Se	antana		954 3891333 et()
	Name of	Person	Area Code Daytime Telephone Number
		e following amount:	·
冒 \$25.00	Filing Fee	S30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed) S60.00 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		si lection orporations 7	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 (((H23000212848 3)))
16	.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	<i></i>	Tallahassee, FL 32303
			·

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ROPAVA LLC			
(Name of the Limited Lie (A Flo	ability Company as it now appear anda Limited Lubility Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Florida document number	ty Company were filed on <u>0</u> 	3/14/2023	and assigned
This smendment is submitted to amend the following	g:		
A. If amending name, enter the new name of the	limited liability company h	ere:	
The new name must be distinguishable and contain the words "	Limited Lisbility Company," the c	designation "LLC" or the abt	reviation "L.L.C."
Enter new principal offices address, if applicable:	<u></u>		
(Principal office address MUST BE A STREET AL	DDRESS)	•	?
			······································
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX	<u> </u>		
B. If amending the registered agent and/or registe agent and/or the new registered office address her Name of New Registered Agent:	ered office address on our r <u>re</u> :	ecords, <u>enter the name</u>	of the new registered
New Registered Office Address:		•	
	Enter Flo	rida strevi addres;	
		, Florida	•
•	City		Zip Code
New Registered Agent's Signature, if changing Regist			
I hereby accept the appointment as registered age provisions of all statutes relative to the proper an accept the obligations of my position as registered being filed to merely reflect a change in the regist company has been notified in writing of this change	d complete performance of d agent as provided for in t tered office address, I here	f my duties, and I am f. Chanter 605 F.S. Or	amiliar with and
	If Changing Registered A	gent, Signature of New Rec	istered Ageni

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each nerson being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MBR	Vanessa Troncoso Sobrado	2721 Executive Park Drive, Sulte 4	——— ≅Add
		Weston, Florida 33331	Remove
			Change
MBR	Paola Troncoso Sobrado	2721 Bxecutivo Park Drive, Suite 4	BAdd
		Weston, Florida 33331	□Remove
			☐ Change
MBR	Rolando Troncoso Sobrado	2721 Executive Park Drive, Suite 4	⊞ Add
•		Weston, Florida 33331	□Remove
			Change
			DAdd
			□ Remove
		-	DChange
			DAdd
			□Remove
			Change
			□Remove
			□ Change

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amending any other luforr	matlon, enter change(s) here: (Attach additional sheets, if necessary.)
<u> </u>	
	
	
	the date of filing: must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (s block does not meet the applicable statutory filing requirements, this date will not be listed as the Department of State's records.
ecord specifies a delayed effect is filed.	ctive date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
sted June 6	2023
<u> </u>	Reciplidroneous
	Signature of a member or authorized representative of a member
Maria Sobrado de Tr	roncoso

Filing Fee: \$25.00