# M11000003498

(Requestor's Name)			
(Address)			
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(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
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SUPLEMENT OF FILING

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#### FLORIDA FILING & SEARCH SERVICES, INC. P.O. BOX 10662 TALLAHASSEE, FL 32302

155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

1/16/14

NAME:

OPICO CAPITAL, LLC

TYPE OF FILING: AMENDMENT

COST:

25.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

#### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: HE Molina LLC	
	Limited Liability Company
Dear Sir or Madam:	
The enclosed application, certificate and fec(s) are	e submitted for filing.
Please return all correspondence concerning this r	natter to the following:
Hugo E. Molina	
Name of Person	
Opico Capital, LLC	
Firm/Company	<b></b>
7395 Arthur St	
Address	
Hollywood, FL 33024	
City/State and Zip Code	<del></del>
hugo.molina@opicocapita	
E-mail address: (to be used for future annual re	port notification)
For further information concerning this matter, pl	
Hugo Molina	1 (917 ) 6884281
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2.661 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 \$30 Filing Fee & Certificate of Status	☐ \$55 Filing Fee & ☐.\$60 Filing Fee, Certified Copy Certificate of Status & Centified Copy
CR2E055 (12/13)	

#### APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT **BUSINESS IN FLORIDA**

#### SECTION I (1-3 must be completed)

1.	Name of limited liability Company as it appears on the records of the Florida Department of State: HE Molina LLC				
2.	. Jurisdiction of its organization: Delaware				
3.	Date authorized to do business in Florida: July 12, 2011				
SI	SECTION II (4-7 complete only the applicable changes)				
4.	New name of the limited liability company: Opico Capital, LLC  (must contain "Limited Liability Company, " "L.L.C.," or "L.L.C.")	۰.,			
Fl th or	f name unavailable, enter alternate name adopted for the purpose of transacting business in orida and attach a copy of the written consent of the managers or managing members adopting e alternate name. The alternate name must contain "Limited Liability Company," "L.L.C."  "LLC.")  If the amendment changes the jurisdiction of organization, indicate new jurisdiction:				
6.	If the amendment changes person, title or capacity in accordance with 605.0902 (1)(c), indicate that change:	D+ 			
7.	Attached is an original certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.  Signature of the authorized representative				
	Hugo Edgardo Molina  Typed or printed name of signee				

Filing Fee: \$25.00

## Delaware

PAGE

### The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY THAT THE SAID "HE MOLINA LLC", FILED

A CERTIFICATE OF AMENDMENT, CHANGING ITS NAME TO "OPICO CAPITAL,

LLC", THE FIFTEENTH DAY OF JANUARY, A.D. 2014, AT 3:33 O'CLOCK

P.M.

4772059 8320

140057819

AUTHENTYCATION: 1066213

DATE: 01-16-14

You may verify this certificate online at corp.delaware.gov/authver.shtml