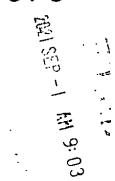
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(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	≥ #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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TALLANASSEE, FLORIDA

2021 SEP - 1 PM 3: 08

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Robsco Holding	s, LLC	
		Art of Inc. File
		LTD Partnership File
		Foreign Corp. File
		L.C. File
		Fictitious Name File
		Trade/Service Mark
		Merger File
		Art. of Amend. File
		RA Resignation
		Dissolution / Withdrawal
		Annual Report / Reinstatement
		Сеп. Сору
		Photo Copy
		Certificate of Good Standing
		Certificate of Status
		Certificate of Fictitious Name
,		Corp Record Search
		Officer Search
		Fictitious Search
Signature	<u> </u>	Fictitious Owner Search
0		Vehicle Search
		Driving Record
Requested by: SET	Н	UCC 1 or 3 File
Name	Date Time	UCC Search
varine	Date THIC	UCC 11 Retrieval
Walk-In	Will Pick Up	Courier

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ROBSCO HOLDINGS, LEC	. 100 TOD. 6	THE OF IT HOLY OF STREET OF C	our records.)	
(Name of the Limi	(A Florida Limited)	nny as it now appears on c Liability Company)	our records.)	
The Articles of Organization for this Limited L	iability Company	were filed on 08/28/20		
Florida document number L03000032496	·	!		
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liab	oility company here:		
The new name must be distinguishable and contain the	words "Limited Liabi	ility Company," the designation	ntion "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		2550 MIAMI ROAD		
		FORT LAUDERDA	LE, FL 33316	
Enter new mailing address, if applicable:		2550 MIAMI ROAD		
(Mailing address MAY BE A POST OFFICE BOX)		FORT LAUDERDA	LE, FL 33316	
B. If amending the registered agent and/or agent and/or the new registered office address.	registered office e <u>ss here</u> :	address on our recor	ds, enter the name of the new registere	
Name of New Registered Agent:	LORI TUXBU	IRY		
New Registered Office Address:	2550 MIAMI ROAD			
Name of New Registered Agent:		Enter Florida's		
	FORT LAUDI	ERDALE	, Florida 33316	
	-	City	Ziv 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.

16 Changing Registered Agent, Signature of New Registered Agent

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

Type of Action

MGR = Manager

AMBR = Aut	horized Member	
Title	Name	Address

MGR	RENE HOFMANN	PO BOX 771539	DAdd
		ORLANDO, FL 32877-1539	\exists Remove
			□Change
MGR	SCOTT DAIAGI	2550 MIAMI ROAD	■Add
		FORT LAUDERDALE, FL 33316	□Remove
			□Change
			Remove
			Change
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		<u> </u>	Remove
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Offective date, if other that fan effective date is listed, the date inserted in the date on the date on the date on the date of the date	this block does t	not meet the ap	plicable statute	ing or more than ory filing requir	optiona (optiona 90 days after filir ements, this da	l) ng.) Pursuant to 605 te will not be list	5.0207 ed as
record specifies a delayed et d is filed.	fective date, but	not an effecti	ve time, at 12:0	l a.m. on the e	arlier of: (b)	The 90th day afte	r the
Dated AUGUST 31		2021	·				
		1					
	/	11.10					
<u>-</u>	Signature	of a member or	authorized repres	entative of a me	mber		

Filing Fee: \$25.00