## L0600002135

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## **COVER LETTER**

Division of Co				
SUBJECT: Robin	nson Family Managem	nent Company, LLC		
	(Name of L	imited Liability Company)	<del> </del>	
The enclosed Articles of	Amendment and fee(s) are s	submitted for filing.		
Please return all correspondent	ondence concerning this matt	ter to the following:		
Ray	mond L. Robinson,	Esq.		
		(Name of Person)	_	
	Robinson & Assoc	iates, P.A., Attorneys a		C
	1501 VeneralAvenu	e, Suite 300		O7 D
		(Address)		可器,
	Coral Gables, FL	33146		一等
		(City/State and Zip Code)	<del> </del>	REPORTA
For further information c	concerning this matter, please	call:		DIVISION OF CORPORATIONS  OT OCT -1 PH 4: 20
Donna Shaffer		at (305 ) 662-7618		
(Name	of Person)	at (305 ) 662-7618  (Area Code & Daytin	ne Telephone Number)	,
Enclosed is a check for the	following amount:			
XX \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclo	osed)

**MAILING ADDRESS:** 

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

STREET/COURIER ADDRESS:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Robinson Family Management Company, LLC		
	(Present Name) (A Florida Limited Liability Company)		
FIRST:	The Articles of Organization were filed on Januaryu6, 2006 and assigned document numberL06000002135		
SECOND:	This amendment is submitted to amend the following:		
	The street addess of the principal office of the Limited Liabil	Lity Company	is:
	C/O Robinson & Associates, P.A., 15 1501 Venera Avenue, Suité 300, Coral Gäblés, FL 33146	<u> </u>	
	The mailing address of the Limited Liability Company is:		
	C/O Robinson & Associates, P.A.,	<del>_</del>	
	1501 Venera Avenue, Suite 300, Coral Gables, FL 33146		
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		EU OF STATE DRPORATION	
		E. RAM	
^	August 1, 2007	ONS.	
DatedA	,		
	AL/C		
	Signature of a member or authorized representative of a member		
	Raymond L. Robinson, Manager		
	Typed or printed name of signee	_	

Filing Fee: \$25.00