

206000102964

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

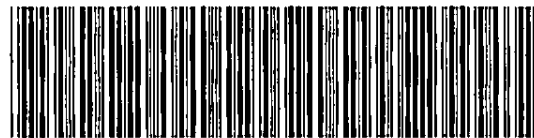
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800326487608

03/19/19--01015--007 **30.00

FILED

2019 MAR 19 P 12:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR 29 2019

T. LEMIEUX

Robenalt & Robenalt

Attorneys at Law

Post Office Box 15470, Sarasota, Florida 34277

Tel: 941.966-7755 / Fax: 888.612.1945

E-mail: john@robenalt-law.com

John A. Robenalt (1922-2009)

John Francis Robenalt

Member of the Florida & Ohio Bars

March 14, 2019

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

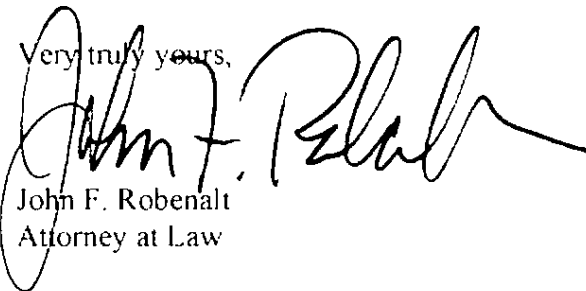
RE: Change of Name for Robenalt Development LLC

Dear Sir or Madam:

Please find enclosed the appropriate forms for to change in name of Robenalt Development LLC to Robenalt Investment LLC. Also enclosed is a check for \$30.00 for the filing fee and Certificate of Status.

Thank you for your help. Please let me know if you have any questions.

Very truly yours,



John F. Robenalt
Attorney at Law

Enclosures

COVER LETTER

**TO: Registration Section
Division of Corporations**

Robenalt Development LLC

SUBJECT: _____
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

John F. Robenalt

Name of Person

Firm/Company

1820 S. Lake Shore Drive

Address

Sarasota, FL 34231

City/State and Zip Code

john@robenalt-law.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John F. Robenalt

941 966-7755

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 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

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**

FILED

Robenalt Development, LLC

2019 MAR 19 P 12:49

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on October 23, 2006 and assigned
Florida document number 106000102964

This amendment is submitted to amend the following:

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

Robenalt Investments LLC

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

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

1820 S. Lake Shore Drive

Sarasota, FL 34231

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

PO Box 15470

Sarasota, FL 34277

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:

New Registered Office Address:

Enter Florida street address

Florida

City

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.

If 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:

MGR = Manager

AMBR = Authorized 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"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
		_____	<input type="checkbox"/> Remove
		_____	<input type="checkbox"/> Change

[illegible]

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated March 14, 2019

John F. Delaney

Signature of a member or authorized representative

John F. Robenalt, Managing Member

Typed or printed name of signee