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S. HAWKES

FEB 0 4 2009

EXAMINER

COVER LETTER

Division of Co		,	
SUBJECT: Robbin	s & Robbins Realty,	LLC	
		ited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Deborah L. Robbins		
		(Name of Person)	
	Robbins & Robbins Real		
		(Firm/Company)	
	P. O. Box 3326		
		(Address)	
	Fort Pierce,FL 34948		
		(City/State and Zip Code)	
For further information of	concerning this matter, please c	ali:	
Deborah L. Robbins		at (772) 332-2160	
(Name	of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for t	he 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)
	ING ADDRESS:	STREET/COURIER Registration Section	ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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 $\label{eq:continuous_problem} \mathcal{H}_{\mathrm{total}} = \{ (\mathbf{r}_{\mathrm{total}}, \mathbf{h}_{\mathrm{total}}, \mathbf{h}_{\mathrm{total}}) \in \mathbf{green}_{\mathrm{total}} \}$

ARTICLES OF AMENDMENT TO 'ARTICLES OF ORGANIZATION OF

Robbins & Robbins Realty, LLC

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

The Articles of Organization for this Limited Liability	Company were filed on December 19, 2008	and assigned
Florida document number <u>L08000115879</u>	·	SECRET
This amendment is submitted to amend the following:		2 -2
A. If amending name, enter the new name of the lin	mited liability company here:	
The new name must be distinguishable and end with the we "L.L.C."	ords "Limited Liability Company," the designation	n "LLC" or the aboreviation
Enter new principal offices address, if applicable:		·····
(Principal office address MUST BE A STREET ADD	DRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office ade		er the name of the nev
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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Donald G. Robbins	707 S. Indian River Drive Fort Pierce, FL 34950	Add Remove
			Add Remove
			Add Remove
			2 2
			Add C
			Add Remove
D. If amend	ding any other information, enter	change(s) here: (Attach additional sheets, if necessary.)	
			
			
Dated Janua	Del	2009 Leading member or authorized representative of a member	
	5.6		

Page 2 of 2

Filing Fee: \$25.00