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T. CLINE

OCT - 3 2012

EXAMINER

COVER LETTER

Division of Corporations
SUBJECT: ROOMSON - BOYD LLC Name of Limited Liability Company
Name of Emitted Elability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Willia Boyd Jr Name of Person
Robinson-Boyd LLC
611 NW 183 rd ter
Miami - Fl 33169 City/State and Zip Code
E-mail address: to be used for future annual report notification)
Name of Person at 786 251 2701 25 25 25 25 25 25 25 25 25 25 25 25 25
Enclosed is a check for the following amount: \$\sum_{25.00}\$ \text{Filing Fee} \sum_{30.00}\$ \text{Filing Fee & S5.00 Filing Fee & S60.00 Filing Fee, Certificate of Status & Certified Copy} \$\sum_{30.00}\$ \text{Filing Fee & S60.00 Filing Fee, Certificate of Status & Certified Copy}
(additional copy is enclosed) Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

TO:

Registration Section

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

Robertson-Boyd	LLC
(Name of the Limited Liability Company as it n (A Florida Limited Liability C	ow appears on our records.)
(
The Articles of Organization for this Limited Liability Company were file	ed on and assigned
Florida document number L12000024127	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability con	pany here:
Robinson - Boyd Ll	
The new name must be distinguishable and end with the words "Limited Liabi "L.L.C."	lity Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	(F) (F)
(Principal office address MUST BE A STREET ADDRESS)	
	SS 1
Enter new mailing address, if applicable:	me n
(Mailing address MAY BE A POST OFFICE BOX)	
THURWING WARTERS WATER TO SEE THE SEE	DE S
	Add
B. If amending the registered agent and/or registered office add	iress 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 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: MGR = Manager MGRM = Managing Member **Type of Action Title Address** <u>Name</u> Add Remove ☐ Add Remove ☐ Add Remove ☐ Add Remove Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary മാ, മഠ12-Signature of a member or authorized representative of a member

Page 2 of 2

BoyD

Willie

Filing Fee: \$25.00

Typed or printed name of signee