

✓
L13000178483

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

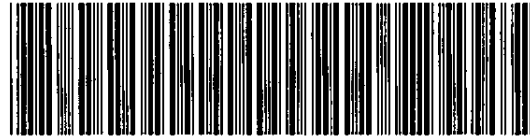
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300255568763

01/17/14--01010--009 **25.00

2014 JAN 17 PM 4:44
TALLAHASSEE, FL 32309

B. BOSTICK

JAN 21 2014

OWNER

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Sansone-Robinson LLC
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:

Stephen J. Smith

Name of Person

McCarthy Leonard & Kaemmerer LC

Firm/Company

400 S. Woods Mill Road, Suite 250

Address

Chesterfield, MO 63017

City/State and Zip Code

ssmith@mlklaw.com

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

For further information concerning this matter, please call:

Suzanne Schmitt

Name of Person

at **314 392-5200**

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

2014 JAN 17 PM 4:44
RECEIVED
TALLAHASSEE, FL 32301

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Sansone-Robinson 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 12/31/2013 and assigned
Florida document number L13000178483.

This amendment is submitted to amend the following:

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

Sansone-Robinson Brokerage Services LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

2014 JAN 17 PM 4:14	ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2014 JAN 17 PM 4:14	ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

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

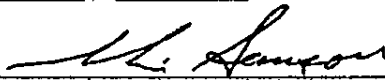
MGR = Manager
AMBR = Authorized Member

☐ Add
☐ Remove
☐ Add
☐ Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be more than 90 days after filing.) (605.0207 (3)(b))

Dated December 31, 2013



Signature of a member or authorized representative of a member

Nick Sansone

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

2014 JAN 17 PM 4:44
FALLHARVEST CT ORD