## 110000205600

(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

6358



500291940605

16 89V -9 (8 4:07

11/08/16--01022--003 \*\*125.00

SUPFICENCY OF TILING SOFT TO MICE NOT BE FILING SO

C. GOLDEN NOV - 9 2016

#### **COVER LETTER**

	gistration Section vision of Corporations
SUBJECT:	ROBIN, LLC
SOBJECT.	Name of Limited Liability Company
The enclose	d Articles of Organization and fee(s) are submitted for filing.
Please return	n all correspondence concerning this matter to the following:
	ANN BLACK
•	Name of Person
	SMITH, THOMPSON, SHAW, MINACCI, COLON & P.A.
•	Firm/Company
	3520 THOMASVILLE ROAD, FOURTH FLOOR
•	Address
	TALLAHASSEE, FL 32309
S	City/State and Zip Code susant@stslaw.com
_	E-mail address: (to be used for future annual report notification)
For further in	formation concerning this matter, please call:
	Ann Black 850 893-4105
-	Name of Person Area Code Daytime Telephone Number
Enclosed is	a check for the following amount:
\$125.00 Fil	
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Street Address New Filing Section Division of Corporations Clifton Building Tallahassee, FL 32314  Tallahassee, FL 32301



#### FLORIDA DEPARTMENT OF STATE Division of Corporations

November 8, 2016

ANN BLACK 3520 THOMASVILLE ROAD FOURTH FLOOR TALLAHASSEE, FL 32309

SUBJECT: ROBIN, LLC

Ref. Number: W16000075840

We have received your document for ROBIN, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

If your business entity does not intend to transact business until January 1st of the upcoming calendar year, you may wish to revise your document to include an effective date of January 1st. If you do not list an effective date of January 1st, your business entity will become effective this calendar year and it will be required to file an annual report and pay the required annual report fee for the upcoming calendar year this coming January, which is merely weeks away. By listing an effective date of January 1st, the entity's existence will not begin until January 1st of the upcoming year and will, therefore, postpone the entity's requirement to file an annual report and pay the required annual report filing fee until the following calendar year.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

16 NOV -9 PH 2

ς V

16 107 -

£0.4

Claretha Golden Regulatory Specialist II New Filing Section

Letter Number: 216A00024021

# ARTICLES OF ORGANIZATION OF ROBETH, LLC



The undersigned, pursuant to the provisions of Chapter 605 of the Florida Statutes (the "Florida Revised Limited Liability Company Act"), for the purpose of forming a Limited Liability Company under the laws of the State of Florida do set forth the following:

\*\*\*\*\*\*

#### 1. NAME.

The name of the Limited Liability Company is **ROBETH**, **LLC** (hereinafter referred to as the "Company").

#### 2. **PERIOD OF DURATION**.

The period of duration of the Company shall be perpetual, unless it is dissolved as provided in the Florida Limited Liability Act or the written Operating Agreement to be executed by all of the Members of the Company.

#### 3. PURPOSE.

To engage in any and all other businesses and activities permitted by the laws of the State of Florida. The Company shall have all of the powers vested in a limited liability company organized and existing by virtue of such laws.

#### 4. MAILING ADDRESS OF BUSINESS.

The mailing of the business in Florida for the Company is: 3520 Thomasville Road, Fourth Floor, Tallahassee, Florida 32309. Such address may be changed from time to time as provided in the Operating Agreement.

#### 5. ADDRESS OF PLACE OF BUSINESS.

The street address of the place of business in Florida for the Company is: 3520 Thomasville Road, Fourth Floor, Tallahassee, Florida 32309. Such address may be changed from time to time as provided in the Operating Agreement.

#### 6. **REGISTERED AGENT.**

The initial registered agent in Florida for the Company is: <u>SUSAN S. THOMPSON</u> and the initial, registered office is located at 3520 Thomasville Road, Fourth Floor, Tallahassee, Florida 32309.

#### 7. MANAGEMENT.

The name and address of the person authorized to manage and control the Limited Liability Company is as follows:

Susan S. Thompson 3520 Thomasville Road, Fourth Floor Tallahassee, Florida 32309.

**EXECUTED** at Tallahassee, Leon County, Florida this <u>g</u> day of November, 2016.

SUSAN S. THOMPSON

### CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT WITH WHOM PROCESS MAY BE SERVED.

Pursuant to the provisions of Section 605 Florida Statutes, the undersigned Limited Liability Company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

- 1. The name of the limited liability company is ROBETH, LLC.
- 2. The name of the registered agent and office is: <u>SUSAN S. THOMPSON</u> at 3520 Thomasville Road, Fourth Floor, Tallahassee, Florida 32309.

#### **ACKNOWLEDGEMENT**

Having been named to accept service of process for the above limited liability company, at the place designated in this certificate, I hereby accept to act in this capacity and agree to comply with the provision of said Act relative to being available at said location.

SUSAN S. THOMPSON, Registered Agent