L20000032221

(Requestor's Name)
(Neglector o Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to Fining Officer.

Office Use Only



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ATA 1 3 2020 I ALBRITTON

COVER LETTER

TO: (Registration Section Division of Corporations
SUBJECT: Robinson Construction 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:
Martin Robinson Name of Person Robinson Construction
7723 Ader Wey
City/State and Zip Code Rahinson Construct LL Egne./com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Martin Robinson at (850) 628-7217 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \$\Bigcup \$55.00 Filing Fee & \$\Bigcup \$60.00 Filing Fee, \$\Bigcup \$\Bigcu
Mailing Address:Street Address:Registration SectionRegistration SectionDivision of CorporationsDivision of Corporations

P.O. Box 6327

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

2020 APR 13 PH 1:00

FLORIDA DEPARTMENT OF STATE Division of Corporations

March 14, 2020

MARTIN ROBINSON 7223 ELDER WAY YOUNGSTOWN, FL 32466

SUBJECT: ROBINSON CONSTRUCTION LLC

Ref. Number: L20000032221

We have received your document for ROBINSON CONSTRUCTION LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the title or capacity of person(s) authorized to manage this limited liability company above the name(s) and address(es) listed. Such titles may include: Manager (MGR), Authorized Member (AMBR), Authorized Person (AP), or Authorized Representative (AR).

Please return 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) 245-6050.

Letter Number: 420A00005677

Irene Albritton
Regulatory Specialist II

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Rosinson (Construction LLC	Sade)
(Name of the Limited Lial (A Flor	pility Company as it now appears on our recorda Limited Liability Company)	<u>ji (is.)</u>
The Articles of Organization for this Limited Liability Florida document number	Company were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and contain the words "I	.imited Liability Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET AD	DRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2011.52 13 PH 3
B. If amending the registered agent and/or registe agent and/or the new registered office address here		er the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street ada	
	rnier r ioriaa street aaa	ress
	City	FloridaZip Code
New Registered Agent's Signature if changing Registe	•	

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 **Address** Title Name Type of Action MGR Matthew Portard Remove MGR Mach Dennis 7273 Ador Way Kungtown A 32466 Remove ☐ Change □Remove _____ □Change □Add ____ Change Remove

□Change

____ Change

Remove

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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	02/18/2020
ecu	ive date, if other than the date of filing:(optional) (optional) ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207
	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ent's effective date on the Department of State's records.
	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
s til	ded.
	200/10/2020 2020
ed.	02/18/2020 . 2020 .
	ghature of a member or authorized representative of a member
	Typed or printed name of signee

Filing Fee: \$25.00