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## **COVER LETTER**

Name of Limited Liability Company					
sed Articles of	Amendment and fee(s) are sub	omitted for filing.			
ırn all correspo	ndence concerning this matter	to the following:			
	Tiffany Turk				
Name of Person					
	ESO Equity Group, LLC				
		Firm/Company			
	150 Cocoa Isles Blvd #202	2			
		Address			
	Cocoa Beach FL 32931				
		City/State and Zip Code			
	<del>-</del>				
	E-mail address: (	to be used for future annual report not	ification)		
r information c	oncerning this matter, please c	all:			
urk		321 783-5252			
Name of Person		Area Code Daytin	ne Telephone Number		
s a check for th	ne following amount:				
) Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Address: Registration Section		<u>Street Address:</u> Registration Se	ection		
Division of Corporations		Division of Cor	rporations		
P.O. Box 6327		_	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		
	Robbins Pa  F:  Robbins Pa  F:  Sed Articles of arm all correspondant of the correspondant of	Name of Lin  sed Articles of Amendment and fee(s) are sub  arm all correspondence concerning this matter  Tiffany Turk  ESO Equity Group, LLC  Cocoa Beach FL 32931  tturk@esoequitygroup.com  E-mail address:  r information concerning this matter, please courk  Name of Person  s a check for the following amount:  D Filing Fee Scentificate of Status  Lailing Address:  Legistration Section  Division of Corporations	Robbins Partners, LLC  Rame of Limited Liability Company  Sed Articles of Amendment and fee(s) are submitted for filing.  In all correspondence concerning this matter to the following:  Tiffany Turk  Name of Person  ESO Equity Group, LLC  Firm/Company  150 Cocoa Isles Blvd #202  Address  Cocoa Beach FL 32931  City/State and Zip Code  tturk@esocquitygroup.com  E-mail address: (to be used for future annual report not r information concerning this matter, please call:  ark  Name of Person  S a check for the following amount:  O Filing Fee  Certificate of Status  Certified Copy (additional copy is enclosed)  Lailling Address: Legistration Section  Division of Corporations  O. Box 6327  The Centre of The Centre		

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Robbins Partners, LLC		
( <u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our records nited Liability Company)	
The Articles of Organization for this Limited Liability Com	pany were filed on May 11, 2021	and assigned
Florida document number L21000219975		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
The new name must be distinguishable and contain 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 ADDRES	<u> </u>	
		2021 JUL SECRETALLA
Enter new mailing address, if applicable:		- <del> </del>
Mailing address MAY BE A POST OFFICE BOX)		55 × <b>III</b>
		<u>-</u> ≥ ~
<ol> <li>If amending the registered agent and/or registered of gent and/or the new registered office address here:</li> </ol>	fice address on our records, <u>enter t</u>	he name of the new register
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Flo	rida
	Ciţ	z.ip Coae

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 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

<u>Title</u>	Name	Address	Type of Action
MGR	ESO Equity Group, LLC	150 Cocoa Isles Blvd #202	Add
		Cocoa Beach FL 32931	
			□ Change
MGR Robbins RE Holdings, LLC	Robbins RE Holdings, LLC		□Add
			□Change
			□Add
			Remove
			Change
			□Remove
			Change
			Remove
			☐ Change
	<del></del>		□Add
			□ Remove
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) \_ (optional) (If an effective 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 (3)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record 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 record is filed. Dated \_\_\_\_ Tomer ( Cush ( Jul 2., 2021 18:11 GMT+3) Signature of a member or authorized representative of a member

Typed or printed name of signee

Tomer Nakash