# 122000258015

(Requesto	or's Name)
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(City/State	e/Zip/Phone #)
PICK-UP	WAIT MAIL
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### **COVER LETTER**

	gistration Sec vision of Corp			·
ann mar		arket by Robin LLC	•	
SUBJECT:		Name of Lim	ited Liability Company	
The enclosed	d Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspon	ndence concerning this matter	to the following:	
		Robin Randazzp		
			Name of Person	
		Sunshine Market by Robin	LLC	
			Firm/Company	<del></del>
		8456 Brackridge blvd S		
			Address	
		Jacksonville/FL 32216		
			City/State and Zip Code	
		sunshinemarketbyrobin@gi	nail.com to be used for future annual report noti	fication)
For further i	nformation co	oncerning this matter, please c		,
Robin Rand	azzo		321 258-1762 at ()	
	Name of	Person		e Telephone Number
Enclosed is	a check for th	e following amount:		
□ \$25.00	Filing Fee	\$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$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 Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Sunshine Markey by Robin LLC

(A Florida Limited Liability Company as it now appears on our records.) Ari 8: | 5

The Articles of Organization for this Limited Liability Company	were filed on 6/5/2022 A L L L L L L L L L L L L L L L L L L
Florida document number L22000258015	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	pility company here:
Sunshine Market by	RODIN LLC
The new name must be distinguishable and contain the words "Limited Liabi	lity 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)	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registered
agent and of the new regulation of the desired and the second of the sec	
Name of New Registered Agent:	
New Registered Office Address:	
Thew 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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGC = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Robin Randazzo	8456 Brackridge Blv S Jacksonville FL 32216	<b>=</b> Add
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September 12, 2022

ROBIN RANDAZZUP 8456 BRACKRIDGE BLVD S JACKSONVILLE, FL 32216

SUBJECT: SUNSHINE MARKET BY ROBIN LLC

Ref. Number: L22000258015

We have received your document for SUNSHINE MARKET BY ROBIN LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Anissa Butler Regulatory Specialist II

Letter Number: 922A00020214

