

L22000531035

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

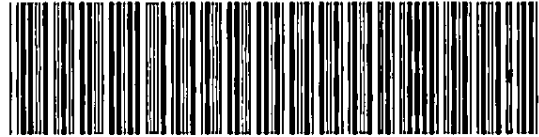
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



200399005582

12/31/22--01001--007 \*\*125.00

2011-2012

ALLAHASSEE FLOR

2022 DEC 20 PM 3:02

RECEIVED

## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Robbins Residential, LLC

Signature \_\_\_\_\_

Requested by: \_\_\_\_\_

Name \_\_\_\_\_

Date \_\_\_\_\_

Time \_\_\_\_\_

Walk-In \_\_\_\_\_

Will Pick Up \_\_\_\_\_

\_\_\_\_\_ Art of Inc. File \_\_\_\_\_  
\_\_\_\_\_ LTD Partnership File \_\_\_\_\_  
\_\_\_\_\_ Foreign Corp. File \_\_\_\_\_  
\_\_\_\_\_ L.C. File \_\_\_\_\_  
\_\_\_\_\_ Fictitious Name File \_\_\_\_\_  
\_\_\_\_\_ Trade/Service Mark \_\_\_\_\_  
\_\_\_\_\_ Merger File \_\_\_\_\_  
\_\_\_\_\_ Art. of Amend. File \_\_\_\_\_  
\_\_\_\_\_ RA Resignation \_\_\_\_\_  
\_\_\_\_\_ Dissolution / Withdrawal \_\_\_\_\_  
\_\_\_\_\_ Annual Report / Reinstatement \_\_\_\_\_  
\_\_\_\_\_ Cert. Copy \_\_\_\_\_  
\_\_\_\_\_ Photo Copy \_\_\_\_\_  
\_\_\_\_\_ Certificate of Good Standing \_\_\_\_\_  
\_\_\_\_\_ Certificate of Status \_\_\_\_\_  
\_\_\_\_\_ Certificate of Fictitious Name \_\_\_\_\_  
\_\_\_\_\_ Corp Record Search \_\_\_\_\_  
\_\_\_\_\_ Officer Search \_\_\_\_\_  
\_\_\_\_\_ Fictitious Search \_\_\_\_\_  
\_\_\_\_\_ Fictitious Owner Search \_\_\_\_\_  
\_\_\_\_\_ Vehicle Search \_\_\_\_\_  
\_\_\_\_\_ Driving Record \_\_\_\_\_  
\_\_\_\_\_ UCC 1 or 3 File \_\_\_\_\_  
\_\_\_\_\_ UCC 11 Search \_\_\_\_\_  
\_\_\_\_\_ UCC 11 Retrieval \_\_\_\_\_  
\_\_\_\_\_ Courier \_\_\_\_\_

**ARTICLES OF ORGANIZATION**  
**FOR**  
**ROBBINS RESIDENTIAL, LLC**

**ARTICLE I - NAME**

The name of the limited liability company **ROBBINS RESIDENTIAL, LLC.**

**ARTICLE II - ADDRESS**

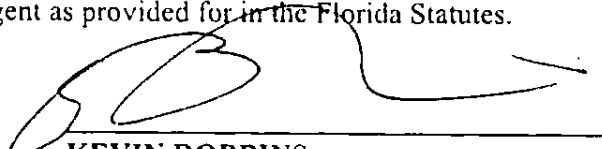
The mailing address and the street address of the principal office of the company is **3733 S TUTTLE AVE, SARASOTA, FL 34239.**

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE AND  
REGISTERED AGENT'S SIGNATURE**

The name and the Florida street address of the registered agent are:

**KEVIN ROBBINS  
3733 S TUTTLE AVE  
SARASOTA, FL 34239**

Having been named as registered agent and to accept service of process for the above stated limited liability company, 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 relating 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 the Florida Statutes.

  
**KEVIN ROBBINS**

**ARTICLE IV - MANAGEMENT**

The business and affairs of the limited liability company shall be managed by:

**KEVIN ROBBINS  
3733 S TUTTLE AVE  
SARASOTA, FL 34239**

**TROY ROBBINS  
3733 S TUTTLE AVE  
SARASOTA, FL 34239**

2022 L.L.C. Form

The members are:

**KEVIN ROBBINS  
3733 S TUTTLE AVE  
SARASOTA, FL 34239**

**TROY ROBBINS  
3733 S TUTTLE AVE  
SARASOTA, FL 34239**

**ARTICLE V — LIMITATION ON AGENCY AUTHORITY OF MEMBERS:**

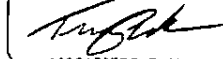
No member of the company shall be an agent of the company solely by virtue of being a member.

Dated: 12/14/2022



**KEVIN ROBBINS**

DocuSigned by:



A35CA78EDFAE463

**TROY ROBBINS**

2022.12.14 11:56