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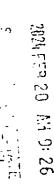
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COVER LETTER

Division of Co	rporations				~ 'm ,
Name Cha	nge - CFO Talent Partners, LLC	Lto Robin Capital Partners, LLC	•		
30bate1	Name of Lim	ited Liability Company			
The condensed the following	CAmandan and and Engles are such	mioral for Otion			
The enclosed Afficies of	Amendment and fec(s) are sub	mitted for ming.			
Please return all correspondence	ondence concerning this matter	to the following:			
	Pedro De Armas				
		Name of Person			
	CFO Talent Partners, LLC				
		Firm/Company			
	208 PHEASANT RUN CI				
		Address	****		
	LONGWOOD, FL 32779				
	4	City/State and Zip Code			
	iampedrodearmas@gmait.e				
	E-mail address: ()	to be used for future annual report notification	ın)		
For further information of	concerning this matter, please ca	all:			
Pedro De Armas		-407 968-2966 at ()		~2	
Name o	of Person	Area Code Daytime Tele	ephone Number	2024 FEB	
Enclosed is a check for t	the following amount:			20	٠٩
■ \$25.00 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 Sta Certified Copy (additional copy is et	itus & in co	: 13

TO:

Registration Section

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

CFO TALENT PARTNERS, LLC		
(Name of the Limited Liability (A Florida L	Company as it now appears on our records.) imited Liability Company)	
The Articles of Organization for this Limited Liability Con Florida document number <u>L23000282953</u>	mpany were filed on 06/12/2023	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
Robin Capital Partners, LLC.		
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRE	ESS)	
- Justine		
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered	office address on our records, <u>enter the nan</u>	ne of the new registered
agent and/or the new registered office address here:		当 等
		EB.
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	111; 9
	. Florida	平元 2
	City	Zip Code 13

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 Title Name **Address** Type of Action _____ Change _____ □Remove _____ □Add _____ □Remove __ 🗀 Remove _____ □Change

								
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Effective date, if other than the If an effective date is listed, the date me Note: If the date inserted in this bedocument's effective date on the I	lock does no	ot meet the	applicable	statutory fili	ng requirem	ents, this da	ate will not be	o 605.0207 c listed as
ne record specifies a delayed effecti ord is filed.	ve date, but	not an effe	ctive time.	it 12:01 a.m	. on the earli	er of: (b)	The 90th day	after the
February 9th Dated		2024	ļ.					
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					e of a membe			-

Filing Fee: \$25.00

Typed or printed name of signee