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Cover Letter

Daytime Telephine - 813-326-2460

Return Address. 4597 14th Way NE Saint Reterbury FL 33703

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COVER LETTER

TO:	Registration So Division of Cor			
SUBJEC	Robinson I	Design and Consulting LLC		
30 00 00	~!· <u> </u>	Name of Lin	nited Liability Company	
The encl	osed Anticles of	Amendment and fee(s) are sul	bmitted for filing.	
Please re	turn all correspo	ondence concerning this matter	r to the following:	
		Christopher Robinson Bel	п	
			Name of Person	· · · · · · · · · · · · · · · · · · ·
		Robinson Design and Con	sulting	
			Firm/Company	
		4597 14th Way NE		2021, JUH 28 SEURETAP TALLAH
			Address	RET NET
		Saint Petersburg FL 3370	3	28 T
			City/State and Zip Code	cation)
		RobinsonDesignandConsul	lting@gmail.com (to be used for future annual report notific	- 100 円 - 100 円
For furth	er information c	oncerning this matter, please o	·	cation) ————————————————————————————————————
Christopl	her Robinson Be	ell	813 326-2460 at()	
	Name o	f Person	· · · · · · · · · · · · · · · · · · ·	Telephone Number
Enclosed	is a check for th	ne following amount:		
□ \$25.0	00 Filing Fec	■ \$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 S Division of Co P.O. Box 632 Tallahassee, F	Section orporations 7	Street Address: Registration Sect Division of Corpo The Centre of Ta 2415 N. Monroe	orations Ilahassee

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Robinson Design and Consulting LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{4/24/2024}{1}$ and assigned Florida document number L24000192903 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 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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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.

City

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>	<u>Name</u>	Address	Type of Action
MGR	Christopher Robinson Bell	4597 14th Way NE	■ Add
		Saint Petersburg FL 33703	□Remove
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record specifies a delayed e is filed.	ffective date, but n	ot an effective tir	ne, at 12:01 a.n	n. on the earlier	of: (b) The 9	0th day aft	er th
6/25 ated		2024					
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	'	a member or author					

Filing Fee: \$25.00