

L05000078411

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

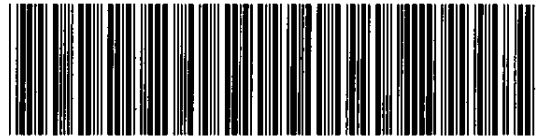
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
08 DEC 22 PM 3:11

J. BRYAN

DEC 23 2008

EXAMINER

**COVER LETTER**

**KEY WEST VENTURES, LLC**  
(Name of Limited Liability Company)

Registered Agent/Registered Office Change and fee(s) are submitted for filing.  
Correspondence concerning this matter to the following:

(Name of Person)

(Firm/Company)

(Address)

(City/State and Zip Code)

For further information concerning this matter, please call:

Adele V. Stones  
(Name of Person)

at ( 305 ) 294-0252  
(Area Code & Daytime Telephone)

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida

**Enclosed is a check for the following amount:**  
 \$25 Filing Fee  
 \$55 Filing Fee

09 DEC 2008

TO: Registration Section  
Division of Corporations  
GONZON

FROM: Adele V. Stones  
Key West, FL 33040

1 Simonton Street  
Key West, FL 33040

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Gonzon Key West Ventures, LLC

2. (a) Principal office address of limited liability company: 625 South Street  
 (Note: **MUST BE STREET ADDRESS**) Key West, FL 33040

(b) Mailing address of limited liability company: 913 Duval Street  
 (Note: **MAY BE POST OFFICE BOX**) Key West, FL 33040

3. Date of filing/registration in Florida: August 9, 2005

4. Document number: L05000078411

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Agent: Donald E. Whitehead

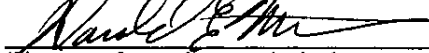
Registered Office Address: 625 South Street  
Key West, FL 33040

(b) Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

**NEW Registered Agent:** \_\_\_\_\_

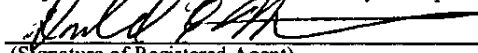
**NEW Registered Office Address:** 913 Duval Street  
 (MUST BE FLORIDA STREET ADDRESS) Key West, FL 33040

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

  
 (Signature of a member or authorized representative of a member)

Donald E. Whitehead  
 (Printed or typed name of signee)

*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 608, 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.*

  
 (Signature of Registered Agent)

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314  
 FILING FEE: \$25.00

FILED STATE  
 SECRETARY OF CORPORATIONS  
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