

L12000086044

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

(Business Entity Name)

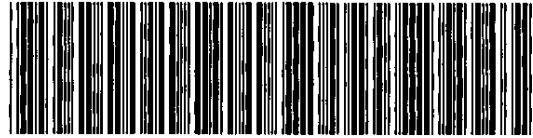
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14 AUG -4 AM 10:36  
MAY 27 2014  
MAY 27 2014

LLC  
RO Change

08-11-14

DC



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 12, 2014

Melinda Voyages  
KEY RESULTS, LLC  
4310 South Ocean Blvd. Unit D  
Highland Beach, FL 33487

SUBJECT: KEY RESULTS, LLC  
Ref. Number: L12000086044

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The limited liability company must be active in order for the registered agent and/or the registered office addresss to be changed on our records.

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.

Darlene Connell  
Regulatory Specialist II

Letter Number: 514A00012688

RECEIVED  
14 AUG -4 AM 7:54  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Key Results LLC  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

MELINDA Voyages  
Name of Person

Key Results LLC  
Firm/Company

4310 South OCEAN BLVD. Unit D  
Address

Highland Beach Florida 33407  
City/State and Zip Code

mvoyages3@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Melinda Voyages at ( 561 ) 376-5842  
Name of Person Area Code & Daytime Telephone Number

**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 32314

Enclosed is a check for the following amount:

- \$25 Filing Fee
- \$55 Filing Fee & Certified Copy

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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: Key Results, LLC
- 2. (a) 3045 N. Federal Highway Suite #60  
Principal office address of limited liability company:  
*(Note: MUST BE STREET ADDRESS)*  
Fort Lauderdale, FL 33306
- (b) 3045 N. Federal Highway Suite #60  
Mailing address of limited liability company:  
*(Note: MAY BE POST OFFICE BOX)*  
Fort Lauderdale, FL 33306

- 3. 7/02/2012  
Date of filing/registration in Florida
- 4. L12000086044  
Document number

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

Registered Office Address *(MUST BE FLORIDA STREET ADDRESS)*  
3045 N. Federal highway Suite #60  
Fort Lauderdale, FL 33306

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

NEW Registered Office Address:  
4310 South OCEAN BLVD. UNIT D  
Highland Beach, FL 33487

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] 5-21-14 KIMON H. VOYAGES  
 Signature of member or authorized representative of a member 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 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.

[Signature] 5-21-14  
 Signature of Registered Agent