Electronic Signature of Registered Agent Da Officer/Director Detail : Da	BOX 4132	ainal Diago of Ducinessa			
HALLANDALE, FL 33008 Current Mailing Address: P.O. BOX 4132 HALLANDALE, FL 33008 US FEI Number: 36-4534162 Certificate of Status Desired: N Name and Address of Current Registered Agent: WALTZER, CRAIG 2650 BISCAYNE BOULEVARD SUITE 100 MIAMI, FL 33137 US The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. SIGNATURE: CRAIG WALTZER 03/21, Electronic Signature of Registered Agent Officer/Director Detail :		icipal Place of Business:		00001	5402005
Current Mailing Address: P.O. BOX 4132 HALLANDALE, FL 33008 US FEI Number: 36-4534162 Certificate of Status Desired: N Name and Address of Current Registered Agent: WALTZER, CRAIG 2650 BISCAYNE BOULEVARD SUITE 100 MIAMI, FL 33137 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: CRAIG WALTZER Electronic Signature of Registered Agent Da Officer/Director Detail : Certificate of Data					
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2650 BISCAYNE BOULEVARD SUITE 100 MIAMI, FL 33137 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: CRAIG WALTZER Electronic Signature of Registered Agent Date Officer/Director Detail : Content of Registered Agent	Name and A	ddress of Current Registered Agent:			
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SIGNATURE: CRAIG WALTZER 03/21/ Electronic Signature of Registered Agent Date of Control					
SIGNATURE: CRAIG WALTZER 03/21/2 Electronic Signature of Registered Agent Date Officer/Director Detail : Date	SUITE 100				
Electronic Signature of Registered Agent Da Officer/Director Detail : Da	SUITE 100 MIAMI, FL 3313	37 US			
Officer/Director Detail :	SUITE 100 MIAMI, FL 3313 The above named	37 US I entity submits this statement for the purpose of changing it	ts registered office or regis	tered agent, or both, in the State of I	
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	SUITE 100 MIAMI, FL 3313 The above named	37 US d entity submits this statement for the purpose of changing it E: CRAIG WALTZER	ts registered office or regis	tered agent, or both, in the State of I	
Title P,D Title V,D	SUITE 100 MIAMI, FL 3313 The above named SIGNATURE	 37 US d entity submits this statement for the purpose of changing it CRAIG WALTZER Electronic Signature of Registered Agent 	ts registered office or regis	tered agent, or both, in the State of I	03/21/2013
Name ROSALER, ERIC M Name KORENSTEIN, NEAL	SUITE 100 MIAMI, FL 3313 The above named SIGNATURE	 37 US d entity submits this statement for the purpose of changing it CRAIG WALTZER Electronic Signature of Registered Agent 	ts registered office or regis	tered agent, or both, in the State of I	03/21/2013
Address P.O. BOX 4132 Address P.O. BOX 4132	SUITE 100 MIAMI, FL 3313 The above named SIGNATURE Officer/Dired Title	 37 US d entity submits this statement for the purpose of changing it CRAIG WALTZER Electronic Signature of Registered Agent Ctor Detail : P,D 	Title	V,D	03/21/2013
City-State-Zip: HALLANDALE FL 33008 City-State-Zip: HALLANDALE FL 33008	SUITE 100 MIAMI, FL 3313 The above named SIGNATURE Officer/Dired Title Name	 37 US d entity submits this statement for the purpose of changing it CRAIG WALTZER Electronic Signature of Registered Agent Ctor Detail : P,D ROSALER, ERIC M 	Title Name	V,D KORENSTEIN, NEAL	03/21/2013

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

PD

2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000069741

Entity Name: KEY CHAINS PLUS II, INC.

FILED Mar 21, 2013 **Secretary of State**

Date

Electronic Signature of Signing Officer/Director Detail