FEI Number:	37-1765097	Certificate of Status Desired: No
Name and Ad	dress of Current Registered Agent:	
MORAK, CHRIST 214 LANSING ISI INDIAN HARBOR		
The above named e	ntity submits this statement for the purpose of changing its regi	tered office or registered agent, or both, in the State of Florida.
SIGNATURE:	CHRISTINE MORAK	04/18/2021
	Electronic Signature of Registered Agent	Date
Authorized P	erson(s) Detail :	

Authorized Terson(s) Detail.			
Title	MGR	Title	MGR
Name	WILLIAMS, THEODORE P	Name	WILLIAMS, SHIELA A
Address	214 LANSING ISLAND DR	Address	214 LANSING ISLAND DR
City-State-Zip:	INDIAN HARBOR BEACH FL 32937	City-State-Zip:	INDIAN HARBOR BEACH FL 32937

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: SHIELA WILLIAMS

Entity Name: TRUE LOVE KEY WEST, LLC

Current Principal Place of Business:

INDIAN HARBOR BEACH. FL 32937 US

733 LOVE LANE KEY WEST, FL 33040

Current Mailing Address: 214 LANSING ISLAND DR

Electronic Signature of Signing Authorized Person(s) Detail

04/18/2021 Date

FILED Apr 18, 2021 Secretary of State 1998633490CC

MGR