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Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : REGISTERED AGENT SOLUTIONS INC

Account Number : I20100000062

Phone

: (888)705-7274

Fax Number

: (888)706-7274

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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REGISTERED AGENT CHANGE KEY ARCHITECTURE, INC.

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COVER LETTER

TO:

Amendment Section Division of Corporations

KEY ARCHITECTURE, INC.

Name of Corporation

DOCUMENT NUMBER:

F14000004315

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Mary Castillo	
Name of Contact Person	
Registered Agent Solutions, Inc.	
Firm/Company	
1701 Directors Blvd. Suite 300	
Address	
Austin, Texas 78744	
City/State and Zip Code	······································
E-mail address: (to be used for future annual re	eport notification)
For further information concerning this matter, plea	ase call:
Mary Castillo	at (888) 705-7274
Name of Contact Person	Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

CR2E045 (04/13)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of cha	provisions of sections 607.050 inge is submitted for a corpord or to change its registered offic	ation organize	d under the lav	vs of the State of _S	South C	
1. The name of	the corporation: KEY AR	CHITEC	TURE, II	VC.		
2. The principal	office address:				····	
3. The mailing a	address (if different):				· · · · · · · · · · · · · · · · · · ·	
4. Date of incorp	poration/qualification: 10/1	0/2014	Document i	number: <u>F1400</u>	00043	315
	d street address of the current r rtment of State: (If resigned, er		nt and registere	d office on file with	h the	
	CORPORATIO	N SER	VICE C	OMPANY		
	1201 HAYS STREET					2(
	TALLAHASSEE		FL	32301-2525)20 JE
6. The name and (if changed):	d street address of the new reg		•		ce	30 PI112: 14
	Registered Age					12:
	155 Office Plaz			<u> </u>	•	Ē.
	Tallahassee	FL.	OT acceptable 3230)1		
The street address changed will	ess of its registered office and I be identical.	i the street add	dress of the bu	siness office of its	registere	d agent,
Such change wa	as authorized by resolution du he board, or the corporation h	uly adopted by as been notifi	y its board of c ed in writing o	lirectors or by an cof the change.	officer so	
/s/ R. Sima	Key, Jr.	 -	R. Sims	Key, Jr.	Preside	ent
l further agree of my duties, ar	t the appointment as registere to comply with the provisions ad I am familiar with and acci ing filed merely to reflect a ch s been notified in writing of th	s of all statute. ent the obliga	gree to act in s relative to th	this capacity, e proper and comp ition as registered	olete perfe	brifthic
Hod	mature of Registered Agent		07/30/20			
	ehalf of an entity:			Date		
Mackenzie Hart.	, Assistant Secretary					
	Typed or Printed Name					
	***F	ILING FEE:	\$35.00 * * *			

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)

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