SIGNATURE: MULLI STATE AD THOUGH CELEBRICAL SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

2001	OMILORM BOS	DINE 32 KEPU	)KI	(ARI	R)	
DOCUMENT # L0000008414  1. Entity Name ( )					FILED	
KEYSTON	IE PARTNERS, L.L.C.			. 1	01 FEB 28 PM 3: 07	
Principal Place 357 N. SPAULI HEATHROW FI	DING COVE	Mailing Address 357 N. SPAULDING COV HEATHROW FL 32746	E		SECRETARY OF STATE TALLAHASSEE, FLORIDA	
2. Principal Pla	ace of Business	3. Mailing Address			) 189(181) 81) 98(1) 38(1) 88(1) 88(1) 88(1) 88(1) 88(1) 81(1) 81(1) 81(1) 81(1)	
Suite, Apt. #	*, etc.	Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE	
City & State		City & State			4. FEI Number Applied For S9-3655420 Not Applicable	
Zìp 	Country			try	5. Certificate of Status Desired	
	6. Name and Address of Curre	nt Registered Agent		- Name	7. Name and Address of New Registered Agent	=
	LD, ANTHONY B AULDING COVE				Address (P.O. Box Number is Not Acceptable)	
HEATHRO!	W FL 32746					
			ĺ	City	FL Zip Code	1
8. The above r	named entity submits this statement	for the purpose of changing its	registere	d office or	or registered agent, or both, in the State of Florida.	l
SIGNATURE _	Signature, typed or printed name of registered ag	ent and title if applicable (NOT	E-Registered	Acent signatu	ature required when reinstating) DATE	
		FILE No Make Check Pa		FEE IS \$		
9.	MANAGING MEN	MBERS/MEMBERS	10.		ADDITIONS/CHANGES	_ ا
TITLE		☐ Delete	TITLE		Change Addition	007
NAME STREET ADDRESS			NAME STREE	ET ADDRESS	ANTHONY O. GREENFIELD MGRM 357 N. SPANLDING COVE	20 (4
CITY-ST-ZIP			CITY-	ST-ZIP	HEATHPOW, FL. 32746	000
TITLE NAME			TITLE		MICHAEL BRADY LESSAD MERM Change Addition	0
STREET ADDRESS CITY-ST-ZIP	-03/07/0101105022			et address St-zip	1501 E. 210 21.	
TITLE		00 *****50.00 L_□ Delete		- SI-ZIF	SANFORD, FL. 32771	
NAME			NAME		GEORGE MICHAEL BROSCAMETMERM	
STREET ADDRESS CITY-ST-ZIP			- 1	et address St-Zip	1360 MAGNOLIA AVE. WILTER PARK, FL. 32789	
TITLE		☐ Delete	TITLE		Change   Addition	
NAME STREET ADDRESS			NAME STREE	ET ADDRESS	FRANK L. PAGE MERM 5010 WILLWOOD WAY	
CITY-ST-ZIP				ST-ZIP	ORLANDO, FL. 32819	
TITLE		☐ Delete	TITLE			
NAME STREET ADDRESS	•		NAME STREE	ET ADDRESS	JOHU A. BARANZANO MERM LICHARGE LIAddition	
CITY-ST-ZIP				ST-ZIP	JUPITEL, FL. 33477	
TITLE NAME		Delete	TITLE NAME		L. FRED COPIEY MGR.M. Change Addition	l
STREET ADDRESS			- 2	: Et address	_ f =	
CITY-ST-ZIP				ST-ZIP	OCALA, FL. 34480	Ì
indicated of	ertify that the information supplied won this report is true and accurate a will be company or the receiver or trus	nd that my signature shall have	the same	legal effe	ated in Section 119.07(3)(i), Florida Statutes. I further certify that the information ect as if made under oath; that I am a managing member or manager of the Lby Changer 608. Florida Statutes	1

2/9/01

407-333-0304 Daylima Phone #