

202000013899

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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MAIL

(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY

FEB 27 2017

Grace S. Rufin

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**From:** donotreply@sunbiz.org  
**Sent:** Monday, February 13, 2017 2:01 PM  
**To:** Grace S. Rufin  
**Subject:** Reinstatement Application Rejected - Document No: L02000013899 Tracking No: CR4740111609

Document Number: L02000013899

Reinstatement Tracking Number: CR4740111609

Your reinstatement could not be processed online, the business entity name listed above is no longer available. You must submit an amendment changing the name of your business entity with a completed reinstatement application, as well as the appropriate filing fees for each. Links to the amendment and reinstatement forms are indicated below.

When you have completed the reinstatement and amendment forms, attach a check and mail both forms together to: Florida Department of State, Division of Corporations, PO Box 6327, Tallahassee, FL 32314. Make the check payable to the Florida Department of State.

If you have questions, please call the appropriate filing section. For Corporations, call 850-245-6059.

For Limited Liability Companies, Limited Partnerships, and Limited Liability Limited Partnerships, call 850-245-6051.

<http://form.sunbiz.org/pdf/cr2e049.pdf> Amendment Form

<http://form.sunbiz.org/pdf/cr2e041.pdf> Reinstatement Form

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Keystone, LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Alan W. Levine, Esquire

\_\_\_\_\_  
Name of Person

Levine & Partners, P.A.

\_\_\_\_\_  
Firm/Company

3350 Mary Street

\_\_\_\_\_  
Address

Miami, FL 33133

\_\_\_\_\_  
City/State and Zip Code

gsr@levinelawfirm.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alan W. Levine

305 372-1350  
at ( )

\_\_\_\_\_  
Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|--|--|--|--|

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Keystone, L.L.C.

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

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TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on June 6, 2002 and assigned  
Florida document number L02000013899.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

Keystone Homestead, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

3350 Mary Street

Miami, FL 33133

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3350 Mary Street

Miami, FL 33133

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Alan W. Levine

New Registered Office Address:

3350 Mary Street

*Enter Florida street address*

Miami

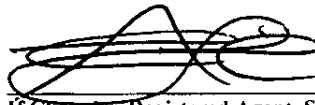
*City*

Florida 33133

*Zip Code*

**New Registered Agent's Signature, if changing Registered Agent:**

*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.*



If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Alan W. Levine	3350 Mary Street	<input checked="" type="checkbox"/> Add
		Miami, FL 33133	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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 SECURITY STAFF  
 ALL INFORMATION CONTAINED  
 HEREIN IS UNCLASSIFIED

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

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SECRETARY OF STATE  
ALLAHBEE, FLORENCE

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated February 21, 2017

Signature of a member or authorized representative of a member

Alan W. Levine

Typed or printed name of signee