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(Re	equestor's Name)			
(Ac	idress)			
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(City/State/Zip/Phone #)				
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Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			
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## **COVER LETTER**

TO: Registration ! Division of C	
SUBJECT:	oys 2 Florida, LLC (Name of Limited Liability Company)
	(Name of Limited Liability Company)
The enclosed Articles	of Amendment and fee(s) are submitted for filing.
Please return all corres	spondence concerning this matter to the following:
-	LORRAINE VERVOORDT  (Name of Person)  LORRAINE VERVOORDT, LLC  (Firm/Company)
-	LORRAINE VERVOORDT, LLC
_	Savasota FL 34232 (City/State and Zip Code)
	C
	Savasota FL 34232
	(City/State and Zip Code)
For further information	n concerning this matter, please call:
LOPRA	(Name of Person) at (941) 735-2820 (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclosed is a check for t	he following amount:
\$25.00 Filing Fee	
M 323.00 rning ree	S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)  Certificate of Status & Certified Copy (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

(Present Name)
(A Florida Limited Liability Company)

Keys 2 FloRIDA, LLC

FIRST:	The Articles of Organization were filed on March 21, 2005 and assigned document number $\underline{L05000028342}$			
SECOND:	This amendment is submitted to amend the following:			
	NAME of LLC from Keyp 2 Florida to  LORRAINE M YERVOORDT, 22C	,20	<u></u>	
,	to			
	LORRAINE M YERVOORDT, 22C		_	
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Dated/V	100 color 6, 2006.	Y OF STAT SEE FLORII	P# 3: W	SENIORIES.
		JATE OF THE PROPERTY OF THE PR	ή† :{	in the second
	40			
	Signature of a member or authorized representative of a member			
	LORRAINE M. VervoorDT			