

205000054784

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

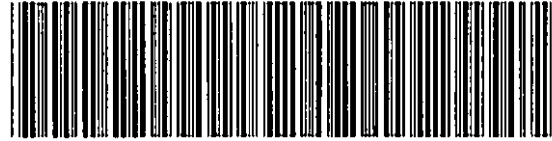
(Business Entity Name)

(Document Number)

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2022 JUN 24 PM 4:02  
STATE OF ALABAMA  
TALLAHASSEE

A. BUTLER

SEP 16 2022

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: KEYSTONE ASSETS, 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:

JOHN ROCKEY

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

KEYSTONE ASSETS, LLC

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

17627 133RD WAY NORTH

\_\_\_\_\_  
Address

JUPITER, FL. 33478

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

JOHN.ROCKEY007 @ GMAIL.COM

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

For further information concerning this matter, please call:

JOHN ROCKEY

561 281.6933  
at ( )

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

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**Mailing Address:**

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

**Street Address:**

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

**FILED**

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

rd.) DEPT. OF STATE  
TALLAHASSEE, FL

John R. Rhee  
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	JOHN ROCKEY	17627 133RD WAY NORTH	<input checked="" type="checkbox"/> Add
		JUPITER, FL. 33478	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	JOHN E O'BRIEN	13434 WEST INDIANTOWN ROAD	<input type="checkbox"/> Add
		JUPITER, FL. 33478	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	PETER CUMMINGS	17885 133RD WAY NORTH	<input type="checkbox"/> Add
		JUPITER, FL. 33478	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	FRANCES CUMMINGS	17885 133RD WAY NORTH	<input type="checkbox"/> Add
		JUPITER, FL. 33478	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	SHIRLEY L. BRINKMAN	13434 WEST INDIANTOWN ROAD	<input type="checkbox"/> Add
		JUPITER, FL. 33478	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	KATHLEEN A MOORE	17585 133RD WAY NORTH	<input type="checkbox"/> Add
		JUPITER, FL. 33478	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

MGR DONALD J MOORE 17585 133RD WAY NORTH JUPITER, FL. 33478 REMOVE

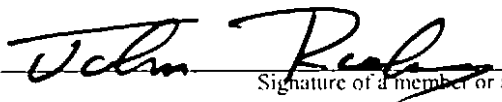
**E. Effective date, if other than the date of filing:** 6/28/22 (optional)

*(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 June 20, 2022



Signature of a member or authorized representative of a member

JOHN ROCKEY

Typed or printed name of signer