10600103014

(Re	equestor's Name)			
(Ad	ldress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	÷#)		
PICK-UP	☐ WAIT	MAIL		
(Bu	isiness Entity Nan	ne)		
		,		
(Document Number)				
Certified Copies	Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



100149069281

04/09/09--01009--002 **25.00

M. THOMAS

APR 10 2009

COVER LETTER

TO: Registration Section Division of Corporations	···	
SUBJECT: Key Club Save, LLC		
(Nam	ne of Limited Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registere	ed Office Change and fee(s) are submitted for filing.	
Please return all correspondence concerni	ing this matter to the following:	
Randi Swatt	,	
(Name of Person)		
Kay Chile Caya III C		
Key Club Save, LLC (Firm/Company)		
1730 S FEDERAL HWY # 343		
(Address)		•
Delroy Booch El 22482		21 TA
Delray Beach, FL 33483 (City/State and Zip Code)	·········	P 2009 APR SECRETA
		PR.
For further information concerning this m	natter, please call:	APR -9 AL
		A C
Randi Swatt	at (305) 331-1452	ス合・・
(Name of Person)	(Area Code & Daytime Telephone Numbe	(1) 5
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the follo	owing amount:	
	☐ \$55 Filing Fee & Certified Copy	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1.	1. Name of the limited liability company: Key Club Save, LLC			
2.	(a) Principal office address of limited liability company: 1730 S FEDERAL HWY # 343 (Note: MUST BE STREET ADDRESS) Delray Beach, FL 33483			
	(b)	Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)	1730 S FEDERAL HWY # 343 Delray Beach, FL 33483``	i B
		2006	L06000103014	
3.	Dat	e of filing/registration in Florida	4. Document number	
5.	(a)	Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:	
	Registered Agent:		Business Filings Incorporated	
		Registered Office Address:	1203 Governor's Square Blvd. Tallahassee, FL 32301-2960	Ħ.
	(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered Office address</u> : NEW Registered Agent: Robert Brizel		W Registered Office address:	+
		NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	1021 Ives Dairy Rd. Suite 220 Miami ■ ,FL 33179	÷
tha off her lial lim	it affice reby bilit	imited liability company is not organized under the later the change or changes are made, the Florida stree of the registered agent will be identical. Or, in the confirmed that the change(s) was/were authorized by company or as otherwise provided in the articles of liability company.	t address of the registered office and the business ase of a Florida limited liability company, it is y an affirmative vote of the members of the limited forganization or the operating agreement of the	
(Pr	inted	Swatt or typed name of signee)	_	
I F con am F.S con	nere mpl Jan S. C nfiri	by accept the appointment as registered agent and a y with the provisions of all statutes relative to the pri miliar with and accept the obligations of my position or, if this document is being filed to merely reflect a c m that the limited liability company has been notified	gree to act in this capacity. I further agree to sper and complete performance of my duties, and I as registered agent as provided for in Chapter 608, change in the registered office address, I hereby I in writing of this change.	
(Si	gnah	te of Registered Agent)		

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE: \$25.00