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(Re	equestor's Name)	· · · · · · · · · · · · · · · · · · ·	
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EXAMINER

COVER LETTER

	egistration Se livision of Cor				•
SUBJECT	r:	Key C	lub Save, LLC		
		Name of Lim	ited Liability Company		
		Amendment and fee(s) are sui	•		
			Martin Toha		
			Name of Person		_
			Key Club Save, LLC		_
			Firm/Company		
1730		S FEDERAL HWY #3	343	Z 0 3	
			Address		50 # W
DELRAY		LRAY BEACH FL 3348	33	7	
			City/State and Zip Code		
		E-mail address: (Bills@profinity.com to be used for future annual repo	rt notification)	200
For further	information c	oncerning this matter, please o	cail:		EE, FLORIG
	Alexia	a Papalazarou	at (786)	228-7860	I.
	Name o	f Person		Daytime Telephone Numb	er
Enclosed is	s a check for th	ne following amount:			
₹ 25.00	Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is en	closed) Certific	iling Fee, ate of Status & ad Copy anal copy is enclosed)
	MAILI	ING ADDRESS:	STREET/C	OURIER ADDRESS:	

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

Taliahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KEY C	LUB SAVE, LLC		
(Name of the Limited Liability (A Florida)	Company as it now appea Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability C	ompany were filed on	10/23/2006	and assigned
Florida document number 106000103014	<u> </u>		
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limit	ited liability company he	<u>re</u> ;	
The new name must be distinguishable and end with the wor "L.L.C."	ds "Limited Liability Compa	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:			至何 6
(Principal office address MUST BE A STREET ADDR	(ESS)		声温 克
Enter new mailing address, if applicable:			HASSEE, FL
(Mailing address MAY BE A POST OFFICE BOX)			量気に
•		<u>,</u>	D
B. If amending the registered agent and/or regist registered agent and/or the new registered office add		our records, <u>enter t</u>	ne name of the new
Name of New Registered Agent:			·
New Registered Office Address:			
	Enter Florida street address		
		, Florida	Zip Code
	City		Zip Code
New Registered Agent's Signature, if changing Registered	g Agent:		
I hereby accept the appointment as registered agent the provisions of all statutes relative to the proper ar accept the obligations of my position as registered ag being filed to merely reflect a change in the registere company has been notified in writing of this change.	nd complete performance gent as provided for in C	of my duties, and I a hapter 608, F.S. Or,	m familiar with and if this document is
	If Changing Registered Age	ent, Signature of New Res	istered Agent

Page 1 of 2

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = 1	Managing Member	·	
<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>P</u>	Randi Swatt	1730 S FEDERAL HWY #343 DELRAY BEACH FL 33483	Add Remove
<u>s</u>	Randi Swatt	1730 S FEDERAL HWY #343 DELRAY BEACH FL 33483	Add Remove
D	Randi Swatt	1730 S FEDERAL HWY #343 DELRAY BEACH FL 33483	Add Remove
<u>MGR</u>	UPSELL, LLC	129 NW 13TH ST #D22 BOCA RATON EL 33432	Add ☐ Remove
			Add Remove
			Add
D. If amen	ding any other information, enter	r change(s) here: (Attach additional sheets, if necessary	v.)
Dated	May 10 ,	2010	HAY 10 PH
	Signature of a	member or authorized representative of a member Martin Toha	STATE ORIGINAL TO THE STATE OF
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00