

L07000102168

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

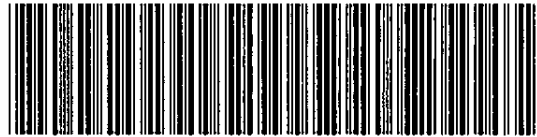
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500119791715

RECEIVED
08 MAR 12 PM 12:42
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

FILED
08 MAR 12 AM 11:30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

nc 3/13/08



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 480910 7616074

AUTHORIZATION :

COST LIMIT : \$ 25.00

[Handwritten signature]

ORDER DATE : March 11, 2008

ORDER TIME : 10:25 AM

ORDER NO. : 480910-070

CUSTOMER NO: 7616074

CHANGE OF AGENT

NAME: LONG KEY II LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

____ CERTIFIED COPY
XX PLAIN STAMPED COPY

CONTACT PERSON: Susie Knight -- EXT# 2956

EXAMINER: _____



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

08 MAR 13 AM 10:46

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

March 12, 2008

SUSIE KNIGHT
CSC
TALLAHASSEE, FL

SUBJECT: LONG KEY II LLC
Ref. Number: L07000102168

RESUBMIT

Please give original
submission date as file date.

We have received your document for LONG KEY II LLC and the authorization to debit your account in the amount of \$25.00. However, the document has not been filed and is being returned for the following:

Please examine the attached printout. Our records show a different current Registered Agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr
Regulatory Specialist II

Letter Number: 508A00015215

**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. The name of the limited liability company is: LONG KEY II LLC

2. The mailing address of the limited liability company is : 3651 COLLINS AVENUE

MIAMI BEACH FL 33140

10-8-2007

L07000102168

3. Date of filing/registration in Florida

4. Document number

5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State:

AGENTS AND CORPORATIONS, INC.

300 FIFTH AVE SOUTH STE 101-330
Address

NAPLES, FL 34102
City, State and Zip

6. The name and address of the new registered agent and/or office:

Corporation Service Company

Name
1201 Hays Street

Florida street address (P.O. Box NOT acceptable)

Tallahassee FL 32301

City, State and Zip

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Raheem Brennerman
(Signature of a member or authorized representative of a member)

Raheem Jefferson Brennerman

(Printed or typed name of signee)

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 608, 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.

Sue G. Knight
(Signature of Registered Agent)

**Sue G. Knight
as its agent**

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

FILING FEE: \$25.00

FILED
08 MAR 12 AM 11:30
SECRETARY OF STATE
TALLAHASSEE FLORIDA