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B. BOSTICK AUG - 8 2012 **EXAMINER**

COVER LETTER

Division of Co						
SUBJECT:	FL REI	Properties LLC				
SUBJECT:		Name of Limited Liability Company				
	f Amendment and fee(s) are sub	_				
		Lee Konken		_		
		Name of Person		•		
	_					
		Firm/Company		٠		
		Address		•		
	Nor	th Fort Myers, FL 339	03			
		City/State and Zip Code				
	E-mail address: (eeKonken@gmail.com to be used for future annual rep	ort notification)			
For further information	concerning this matter, please of	-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	12 AUG		
	Lee Konken	at (847)	489-3197	-6	graza A	
	of Person	Area Code &	Daytime Telephone Numbe	AH II:		
Enclosed is a check for	· ·			RIDA RIDA		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is e	nclosed) Certified	ate of Status &	osed)	

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

	FL REI Prop	erties LLC			
(Name of the Limited (A	Liability Comparts Florida Limited L	ny as it now appear iability Company)	s on our records.)		
The Articles of Organization for this Limited Liability Company were filed on03/20/2008 and					
Florida document number L08000028					
This amendment is submitted to amend the following	owing:				
A. If amending name, enter the new name o	f the limited liab	ility company her	<u>e</u> :		
	Red Key Re	ealty LLC			
The new name must be distinguishable and end wi "L.L.C."	h the words "Limi	ted Liability Compa	ny," the designation	'LLC" or the abbreviation	
Enter new principal offices address, if applic	able:	same			
(Principal office address MUST BE A STREE	T ADDRESS)			7. 12 7. 12	
				ASS - 6	
Enter new mailing address, if applicable:		same			
(Mailing address MAY BE A POST OFFICE	BOX)			己の主じ	
				0R.1. 5	
				Ä	
B. If amending the registered agent and/ registered agent and/or the new registered of	-		our records, <u>enter</u>	the name of the new	
Name of New Registered Agent:	same				
New Registered Office Address:	same				
		En	ter Florida street ad	ldress	
			_, Florida _		
		City		Zip Code	

New Registered Agent's Signature, if changing Registered Agent:

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.

If Changing Registered Agent, Signature of New Registered Agent

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 = Managing Member <u>Title</u> **Name Address Type of Action** ☐ Add Remove ☐ Add Remove ☐ Add ☐ Remove Remove ∏∧dd ___Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) No other cahnges changes Signature of a member or authorized representative of a member W. Lee Konken Typed or printed name of signee

Page 2 of 2_

Filing Fee: \$25.00