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COVER LETTER

TO: Registration Se Division of Cor					
	E PR, LLC				
SUBJECT:	Name of Limi	ted Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub-	nitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	Linda Roth, Esq.				
		Name of Person			
	Linda Roth, P.A.	,			
		Firm/Company			
	2333 Brickell Avenue, Sui	te A-I			
		Address			
	Miami, FL 33129		•		
		City/State and Zip Code			
	lr@lindarothlaw.com		<u></u>		
	E-mail address: (to be used for future annual report notif	ication)		
For further information of	concerning this matter, please ca	all:	2.rt 2-17.go	r\o	
Linda Roth, Esq.		305 774-7070		2016 J	1 J
Name o	of Person		e Telephone Number		entine)
Enclosed is a check for t	he following amount:		77 113 FT 673	U , ;	
\$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 Sta Certified Copy (additional copy is e	atus.&	

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

KEYSTONE PR, LLC					
(<u>Name of the Lim</u>	ited Liability Company as (A Florida Limited Liabili	it now appears on our ity Company)	records.)		
The Articles of Organization for this Limited I Florida document number <u>L13000015334</u>		e filed on January 30), 2013	and ass	igned
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name of	of the limited liability	company here:			
The new name must be distinguishable and contain the	words "Limited Liability Co	ompany," the designation	on "LLC" or the ab	breviation "L.	L.C."
Enter new principal offices address, if appli					
(Principal office address MUST BE A STRE	ET ADDRESS)				
Enter new mailing address, if applicable:					
(Mailing address MAY BE A POST OFFICE					
			 		
B. If amending the registered agent and		address on our r	acords ontor:	the name	of the
registered agent and/or the new registered of	office address here:	address on our r	ecords, <u>enter</u>	the name	or the
Name of New Registered Agent:	Linda Roth, P.A.			JAN .	STREET,
New Registered Office Address:	2333 Brickell Avenu		ا سرا		j
	Minui	Enter Florida stree	F	<u></u>	
	Miami		331	129	

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 605, 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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

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 = M $AMBR = A$	fanager .uthorized Member		
<u>Title</u>	Name	Address	Type of Action
			Add
			Remove
			□ Change
			□ Add
			□ Remove
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ffective date, if other than the date of fili	,	(optional)	
an effective date is listed, the date must be specific a lote: If the date inserted in this block does not	cannot be prior to date of filing or mo	ore than 90 days after filing.)	Pursuant to 605.0207
ocument's effective date on the Department of	tate's records.	,	
	and the second s	40.04	
e record specifies a delayed effective The 90th day after the record is filed	ate, but not an effective ti	me, at 12:01 a.m. o	n the earlier of
ated December 21	2015		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00