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D. BRUCE

TO: Registration Section
Division of Corporations

SUBJECT: KEY ENTERPRISES INTERNATIONAL, LLC.

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Manuel Gutierrez

Name of Person

Kite Technology USA, Inc.

Firm/Company

1102 Little Creek Rd

Address

Orlando, FL 32825

City/State and Zip Code

mgutierrez@kitetechnologygroup.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Manuel Gutierrez

₃₁,407,557**-**0512

Area Code & Daytime Telephone Numbe

Enclosed is a check for the following amount:

Name of Person

■ \$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 Status &
Certified Copy
(additional copy is enclosed)

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

KEY ENTERPRISES INTERNATIONAL, LLC.

(Name of the Limited Liability Company as it now appears on our records.)

(A	riorida Lillited Lia	ionty Company)	
The Articles of Organization for this Limited Li Florida document number L13000018494	ability Company v	vere filed on <u>02/05/201</u>	and assigned
This amendment is submitted to amend the following	wing:		
A. If amending name, enter the new name of	the limited liabil	ity company here:	
The new name must be distinguishable and end wit "L.L.C."	h the words "Limite	ed Liability Company," the c	designation "LLC" or the abbreviation
Enter new principal offices address, if applica	able:		
(Principal office address MUST BE A STREE	T ADDRESS)		20
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE A B. If amending the registered agent and/or registered agent and/or the new registered of	or registered offi		AHASSEE A PA
Name of New Registered Agent:	Manuel Guti	errez	
New Registered Office Address:	1102 Little C	reek Rd	
		Enter Flori	da street address
	Orlando		, Florida <u>32825</u>
		City	Zip Code
New Registered Agent's Signature, if changing F	legistered 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 kereby 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	EDMONDS, WILLIAM SJR	1022 VANNESSA DRIVE	Add
		Oviedo, FL 32765	Remove
			_
			Add
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. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	Federal Employer Identification Number: 46-1969669
ated	7014,30th, 2013
	(bound) fordifolds
٠	Signature of a member or authorized representative of a member
	Typed or printed name of signee
	t yped of printed name of signee
	Page 3 of 3

Filing Fee: \$25.00

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