# L13000/43692

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# **COVER LETTER**

SUBJECT: KeyLin	ne Waterspor Name of Limit	ed Liability Company			
	amendment and fee(s) are subsidence concerning this matter	-			
	Lauren Kris	stin Sands Name of Person			
	Key Lime W	atersports, LLC.			
	1489 Sandpip	er B) vd Address		•	
	Homestead,	FL, 33035 City/State and Zip Code			
	Keylimenate	crsports. Com o be used for future annual report notification			
For further information co	E-mail address: (to ncerning this matter, please ca	-	on)		
Lauren Sur Name of		at ( <u>786) 512 - 3395</u> Area Code & Daytime Tel	8 lephone Number	SI AUN EIG	-
Enclosed is a check for the	· following amount:	ŕ	- 15 - 15 - 25 - 25 - 25 - 25 - 25 - 25 - 25 - 2	FM -: 0	
S25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Filing F Certificate of Certified Cop (additional co	ee, Status &	osed)

### MAILING ADDRESS:

TO;

Registration Section
Division of Corporations

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

Keylime waters ports (Name of the Limited Liability (A Florida	y Company as it now appears Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Liability C	Company were filed on OC	+11, 2013 and assigned
Florida document number <u>L1300014369</u> 2	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	nited liability company here	
<u> </u>		
The new name must be distinguishable and end with the wo "L.L.C."	rds "Limited Liability Compan	y," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	n/ <del>a</del>	10 to 12 to
(Principal office address MUST BE A STREET ADDI		
		शही ज
F	D 10	
Enter new mailing address, if applicable:	<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)		<del>5, ' =</del>
B. If amending the registered agent and/or registered agent and/or the new registered office add  Name of New Registered Agent:		r records, <u>enter the name of the new</u>
Name of New Registered Agent.		
New Registered Office Address:	n / A	r Florida street address
		, Florida
New Registered Agent's Signature, if changing Registere		p Guuc
I hereby accept the appointment as registered agent the provisions of all statutes relative to the proper a	and agree to act in this cap	

If Changing Registered Agent, Signature of New Registered Agent

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 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>	<u>Name</u>	Address	Type of Action
MGR	Judy Baumeister	16860 Sw 276th St	Add
		Homestead, FL, 33035 3303	Remove
mgrm	Lauren Sands	1489 Sandpiper Blvd	X Add
		Homestead, Fl, 33035	Remove
MGRM	Stephen Sands	1489 sandpiper Blvd	X Add
		Homestead, FL, 33035	Remove
			_
MGRM	David Sands	920 South Bluebird lane	_ X Add
		Homestead, FL, 33035	Remove
			- - <u></u>
			Add.,
		10 = 10 = 10 = 10 = 10 = 10 = 10 = 10 =	Remove
			·
			Add
			Remove
			_

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
•	<u>n</u>	
Dated .	November 13, 2013.	
	Lawrenkgands	
	Signature of a member or authorized representative of a member	
	Lauren K Sunds	
	Typed or printed name of signee	
	Page 3 of 3	

Filing Fee: \$25.00

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