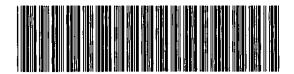
## L14000112782

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

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SECRETARY OF STATE
SHIVANIASSEE, FLORIG

## **COVER LETTER**

Div	ision of Corp	orations		
SUBJECT:	KEY NATIO			
oc by Lett.			ited Liability Company	
The enclosed	l Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return	all correspon	dence concerning this matter	to the following:	
		RICARDO RODRIGUEZ		
			Name of Person	
			Firm/Company	
		9970 RAMBLEWOOD D	R	
			Address	
		CORAL SPRINGS, FL 33	071	
			City/State and Zip Code	<u> </u>
		REA1520INFO@BELLSO		<u></u> .
		E-mail address: (	to be used for future annual report notific	eation)
For further i	nformation co	ncerning this matter, please ca	all:	
RICARDO	RODRIGUEZ		954 425-2775	
	Name of	Person	at () Area Code Daytime	Telephone Number
Enclosed is	a check for the	e following amount:		
\$25.001	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)

TO:

**Registration Section** 

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1. 32314

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

15 JUN 16 PM 3: 09

SECRETARY OF STATE TALLAHASSEE, FLORIDA

June 1, 2015

RIC ARDO RODRIGUEZ 9970 RAMBLEWOOD DR CORAL SPRINGS, FL 33071

SUBJECT: KEY NATION LLC Ref. Number: L14000112782

We have received your document for KEY NATION LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 245-6051.

Tammy Hampton Regulatory Specialist III

Letter Number: 015A00011452

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

V	EY	NI.	Α٦	T1/	\NI	11	$\mathbf{C}$
$\mathbf{r}$	L: Y	17/	4 1	ш	JIN	1	1.1.

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

The Articles of Organization for this Limited Liability Florida document number L14000112782	y Company we	ere filed on $\frac{07/17}{}$	7/2014	Dogand Sign	ned
This amendment is submitted to amend the following				弱。	
A. If amending name, enter the new name of the I	imited liabilit	y company here	<b>:</b>	AM TO STA	9
The new name must be distinguishable and contain the words "I	Limited Liability	Company," the desig	gnation "LLC" or the al	obrevia For L.L.C	<del>5.</del>
Enter new principal offices address, if applicable:		16330 CASTELLO	O COURT	7	
(Principal office address MUST BE A STREET AD	DRESS)	DELRAY BEACH	I, FL 33484		
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or reregistered agent and/or the new registered office a	gistered offic	e address on o	our records, <u>enter</u>	the name of	the new
Name of New Registered Agent:	SA DE LA MEI	₹			
New Registered Office Address: 163	330 CASTELLO	O COURT			
		Enter Florida	street address		
DE	ELRAY BEACH	ſ	, Florida <sup>33</sup>	1484	
		Cir <sub>y</sub> :		Zip Code	<del></del>
New Designand Agent's Signature if shanging Design					

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.

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ALBERTO BARCELO	12773 NW 13TH STREET	
		SUNRISE, FL 33323	■ Remove
			Change
MGR	LISA DE LA MER	16330 CASTELLO COURT	<b>=</b> Add
		DELRAY BEACH, FL 33484	□ Remove
			Change
			Remove
		<del></del>	Change
			Add SECAN ROLL AND RO
			AHASSHE, FLORIE
			Remove
			Change
			☐ Remove
		W-17-18-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	Change

, , , ,				
		<del> </del>		
				<u></u>
-119.0-				
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ctive date, if other than th	ie date of filing:	1/2015	(0	optional)
effective date is listed, the date m : If the date inserted in this l	ust be specific and cannot block does not meet the	be prior to date of film applicable statutor	g or more than 90 days . v tiling requirements.	after filing.) Pursuant to 605.02 , this date will not be listed
ment's effective date on the			,	
ecord specifies a delaye	ed effective date, t	out not an effect	tive time, at 12:0	)1 a.m. on the earlier
ie 90th day after the re	cord is filed.		·	
d 05/01/2015	9:23	a.m.		ASE 15
				CRE
	///	/ / .		专式 一
A Ref. and Control of the Control of	Signature of a member	or authorized represe	ntative of a member	<u>်ကိုသို့</u> တ
		DE LA MER		AM 7: 35

Page 3 of 3

Filing Fee: \$25.00