

215000078666

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

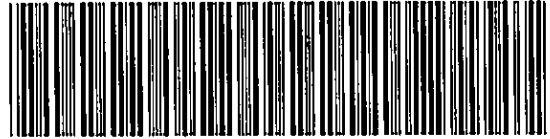
(Business Entity Name)

(Document Number)

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18 NOV -6 AM 10:02  
TALLAHASSEE, FLORIDA

K. SALY

NOV 20 2018

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: KEY WEST-PH, 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:

Robert E. Schmidt, Jr.

\_\_\_\_\_  
Name of Person

Key West-PH, LLC

\_\_\_\_\_  
Firm/Company

2226 State Road 580

\_\_\_\_\_  
Address

Clearwater, Florida 33763

\_\_\_\_\_  
City/State and Zip Code

bob@si-south.com

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

For further information concerning this matter, please call:

Sandra Roland

727 669-1500

\_\_\_\_\_  
Name of Person

at ( )

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$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 WEST-PH, LLC

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

FILED  
18 NOV -6 AM 10:10  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on May 4, 2016 and assigned  
Florida document number L15000078666.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

2226 State Road 580

(Principal office address MUST BE A STREET ADDRESS)

Clearwater, FL 33763

Enter new mailing address, if applicable:

2226 State Road 580

(Mailing address MAY BE A POST OFFICE BOX)

Clearwater, FL 33763

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

Robert E. Schmidt, Jr.

New Registered Office Address:

2226 State Road 580

*Enter Florida street address*

Clearwater

*City*

Florida

33763

*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 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

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>	<u>Address</u>	<u>Type of Action</u>
OPMG	Robert E. Schmidt, Jr.	2226 State Road 580 Clearwater, FL 33763	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
OPMG	Jesse McInerney	2165 Louisa Dr. Belleair Beach, FL 33763	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

18 NOV - 6 AM 10:10  
☐ Remove  
☐ Change  
☐ Add  
☐ Remove

FILED


11

18 NOV - 6 AM 10:10

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.

October 22<sup>nd</sup> 2018



Signature of a member or authorized representative

Signature of a member or authorized representative of a member

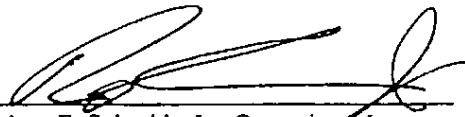
Typed or printed name of signee

**WRITTEN ACTION  
OF  
MEMBERS  
OF  
KEY WEST-PH, LLC**

This Written Action of the Members of the above captioned Limited Liability Company is entered into by all Members of the Company to effectuate the resolutions contained herein.

**IT IS RESOLVED**, that the Operating Manager shall hereafter be **ROBERT E. SCHMIDT, JR.**

Executed this 14<sup>th</sup> day of August, 2018.

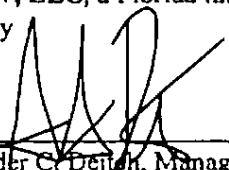
  
Robert E. Schmidt, Jr., Operating Manager

Members:

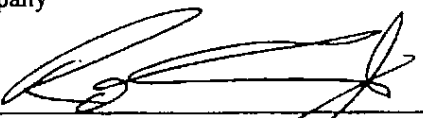
**OJ KW, LLC**, a Florida limited liability company

By:   
Owen C. Ewing, Managing Member

**MY KW, LLC**, a Florida limited liability company

By:   
Alexander C. Denton, Managing Member

**SCHMIDT INVESTMENTS OF SOUTH FLORIDA, LLC**, a Florida limited liability company

By:   
Robert E. Schmidt, Jr., Operating Manager