

Division of Corporations

L17000028396

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H19000049856 3)))



H190000498563ABCS

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : CORPORATE CREATIONS INTERNATIONAL INC
Account Number : 110432003053
Phone : (561)694-8107
Fax Number : (561)694-1639

FILED
2019 FEB 12 PM 1:17
TALLAHASSEE, FL

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
KEYS PROPANE INVESTMENT, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$55.00

2019 FEB 12 PM 1:17
TALLAHASSEE, FL

Electronic Filing Menu

Corporate Filing Menu

Help

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

KEYS PROPANE INVESTMENT, LLC

(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 Company were filed on February 7, 2017 and assigned

Florida document number L17000028296

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:

521 LAKE DR

(Principal office address MUST BE A STREET ADDRESS)

DELRAY BEACH, FL 33444

Enter new mailing address, if applicable:

521 LAKE DR

(Mailing address MAY BE A POST OFFICE BOX)

DELRAY BEACH 33444

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:

AARON YOUNGER

New Registered Office Address:

521 LAKE DR

Enter Florida street address

DELRAY BEACH

Florida 33444

City

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>
AMBR	COMO OIL COMPANY OF FLORIDA	1701 COMMERCE AVE VERO BEACH, FL 32960	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
PRES	AARON YOUNGER	521 LAKE DR DELRAY BEACH, FL 33444	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

COMO OIL COMPANY OF FLORIDA DISSOCIATED AS OF FEBRUARY 8, 2019 (see attached). As a result, the
 sole member of the Company is Younger Family Investments, LLC.

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
 (b) The 90th day after the record is filed.

Dated FEBRUARY 11, 2019



Signature of a member or authorized representative of a member

AARON YOUNGER

Typed or printed name of signee

FILED
 2019 FEB 12 PM 1:17
 TALLAHASSEE, FL
 DEPT. OF STATE

NOTICE OF DISSOCIATION UNDER SECTION 605.0602, FLA. STATS.

Please be advised that the undersigned, as a Member of KEYS PROPANE INVESTMENT, LLC, a Florida limited liability company ("KPI"), hereby provides notice to the President of said KPI, namely Robert M. Hall, of the dissociation of the undersigned of and from the Company pursuant to Section 605.0602, *Florida Statutes*, consistent with Section 15 of the Operating Agreement of KPI. As such, given this notice, the said entity, KPI, is hereby dissolved and deemed to be dissolved effective as of the date set forth below of this Notice.

IN WITNESS WHEREOF, the undersigned has caused these presents to be executed on the day and year set forth below.

COMO OIL COMPANY OF FLORIDA, a Florida corporation

By: Robert M. Hall, Pres.
ROBERT M. HALL, President

STATE OF FLORIDA)

COUNTY OF INDIAN RIVER)

The foregoing instrument was acknowledged before me this 07th day of February, 2019, by ROBERT M. HALL, as the President of COMO OIL COMPANY OF FLORIDA, a Florida corporation, who did acknowledge before me that said person executed the foregoing instrument for the uses and purposes therein set forth. Said party has produced a current Florida driver's license as identification, and I have thus confirmed said party's identity.

NOTARY PUBLIC
(Affix Official Seal)



JAMES ATWOOD TAYLOR, III
NOTARY PUBLIC
STATE OF FLORIDA
Commission #FF960585
Expires 2/15/2020