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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)214-8442

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

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-mail	DUULOCC.			

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN TAMPA BAY KEY REALTY LLC

Certificate of Status	0
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K. SALY

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

FILED
2021 MOV 18 PM 12: 55
TALLAHASSEE, FLORIDA

TAMPA BAY KEY REALTY 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 Com	npany were filed on	04/25/2017	and assigned
Florida document number L17000091481			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	d liability company	here:	
The new name must be distinguishable and contain the words "Limited	d Liability Company." th	e designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	•••	····	
(Principal office address MUST BE A STREET ADDRE	(35)		
Enter new mailing address, if applicable:	<u></u>		
(Mailing address MAY BE A POST OFFICE BOX)			
	,		
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:  Name of New Registered Agent:	office address on ou	r records, <u>enter t</u>	ne name of the new registered
New Registered Office Address:			
New Registere Office Address.	Enter	Florida street address	
		. Flor	rida
	City	·	idaZip Code
New Registered Agent's Signature, if changing Registered	Agent:		
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and con accept the obligations of my position as registered age being filed to merely reflect a change in the registered company has been notified in writing of this change.	nplete performance ent as provided for i	of my duties, and In Chapter 605, F	l I am familiar with and .S. Or, if this document is

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> litie</u>	<u>Name</u>	Address	Type of Action
MBR	PINGARO II, DON GERARD	10837 GARDEN RIDGE COURT	∐Add
		DAVIE, FL 33328	Remove
		<u></u>	□ Change
MBR	LYMAN, JACOB	10837 GARDEN RIDGE COURT	
		DAVIE, FL 33328	Remove
			□Change
MGR	PINGARO II, DON GERARD	10837 GARDEN RIDGE COURT	<b>⊞</b> Add
		DAVIE, FL 33328	□ Remove
MGR	LYMAN, JACOB	10837 GARDEN RIDGE COURT	
		DAVIE, FL 33328	□Remove
			Change OCHANGE Add 18 Remove # 12:
			□ Add

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ffective date, if other than the d an effective date is listed, the date must Note: If the date inserted in this block locument's effective date on the Dep	be specific and cannot be k does not meet the	applicable st	of filing or more that atutory filing rec	(option nan 90 days after fi puirements, this (	ling.) Pursuant to 605.020
,					
record specifies a delayed effective I is filed.	date, but not an effe	ctive time, al	12:01 a.m. on th	e earlier of: (b)	The 90th day after the
	2021				
November 18					
Dated November 18	ignature of a member				

Filing Fee: \$25.00