

L17 000 252 054

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

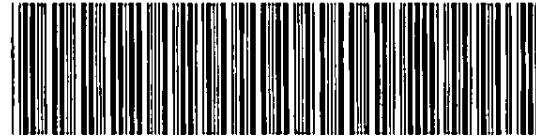
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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04/26/19--01001--011 **25.00

2019 MAY 17 AM 10:12
SECRETARY OF STATE
MAIL ROOM (10-001)

FILED

MAY 20 2019

M. SOLOMON



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 6, 2019

BILL HAVRE
7901 4TH ST N, STE 300
ST PETERSBURG, FL 33702

SUBJECT: KEY AQUASPORTS LLC
Ref. Number: L17000252054

We have received your document for KEY AQUASPORTS 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):

Please complete 5 (a) of the application

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.

Stacy Prather
Regulatory Specialist III

Letter Number: 319A00009089

RECEIVED
MAY 17 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Key Aquasports
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Bill Haure
Name of Person

Key Aquasports
Firm/Company

7901 4th St. N. STE 300
Address

St. Petersburg FL 33702
City/State and Zip Code

Underwoodmark26@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

_____ at (_____) _____
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Key Aquasports LLC

2. (a) _____ (b) _____
 Principal office address of limited liability company: Mailing address of limited liability company:
 (Note: MUST BE STREET ADDRESS) (Note: MAY BE POST OFFICE BOX)

74560 Overseas Hwy suite 6
Islamorada, FL, 33036

74560 Overseas Hwy suite 6
Islamorada, FL, 33036

3. 4/24/19
 Date of filing/registration in Florida

4. L17000252054
 Document number

5. (a) Mark A. Underwood
 Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

74560 Overseas Hwy

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Villa #6
Islamorada, FL 33036

(b) Registered Agents Inc.
 Enter name of NEW Registered Agent and/or NEW Registered Office address:

7901 4th St N

NEW Registered Office Address:

STE 300

St. Petersburg, FL 33702

2019 MAY 17 AM 10:12
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
 FILED

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

[Signature]
 Signature of a member or authorized representative of a member

Mark Underwood
 Printed or typed name of signee

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.

Bill Havre Bill Havre - Assistant Secretary
 Signature of Registered Agent