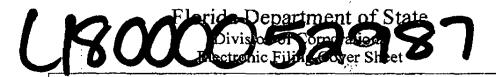
Division of Corporations

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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.

(((H18000117813 3)))



H180001176133ABC/

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : RICHARDS & ASSOCIATES, PA.

Account Number : I20110000091 Phone

Fax Number

: (305)858-9900 : (305)295-0015

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **NEVIS KEY LLC**

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Estimated Charge		\$25.00

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Corporate Filing Menu

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COVER LETTER

.. : ****.:

TO:	Registration Se Division of Cor			•		
SUBJ		KEY LLC				
3010		Name of Lim	ited Liability Company			
			j.			
The er	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please	return all correspo	ndence concerning this matter	to the following:			
		ELENA DIAZ				
		*************************************	Name of Person			
		RICHARDS & SANCHEZ	۷, P.A			
			Firm/Company			
	2665 SOUTH BAYSHORE DRIVE, SUITE 703					
			Address			
		MIAMI, FLORIDA, 3313:	3			
			City/State and Zip Code			
		ediaz@richards-law.com				
		E-mail address: (i	to be used for future annual report notifi	cation)		
For fu	rther information c	oncerning this matter, please ca	all:			
ELEN	IA DIAZ		305 8589900			
	Name o	Person	at () Area Cod - Daytime	Telephone Number		
	•		i i			
Enclos	sed is a check for th	e following amount:				
■ \$2	5.00 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

NEVIS KEY	LLA			
(Name of the Limited Liability Compan (A Florida Limited L	iy as it now appears iability Company)	on our records.)	····	
The Articles of Organization for this Limited Liability Company vi Florida document number L18000052987	were filed on	02/28/2018	and assigned	
This amendment is submitted to amend the following:	-			
A. If amending name, enter the new name of the limited liabil	lity company her	<u>e</u> :		
		500	麗	
The new name must be distinguishable and contain the words "Limited Liability	ty Company," the des	ignation "LLC" or the labbi	reviation "ETP:C."	
Enter new principal offices address, if applicable:			70 cm	
(Principal office address MUST BE A STREET ADDRESS)		Ser.	ယ ရ	
	Ti	जिल्	<u> </u>	
Enter new mailing address, if applicable:	5		Co Comment	
•••		<u> </u>		
(Mailing address MAY BE A POST OFFICE BOX)	7278			
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here:		our records, <u>enter t</u>	ne name of the nev	
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
 		, Florida	·	
	City		Zıp Code	

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to oct 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 Emistered Agent, Signature of New Registered Agent

Q.

Apr 13 2018 2:47PM

HP LASERJET FAX

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>	Name	Address	Type of Action
MGR	ARELLANO, CARLOS	2665 SOUTH BAYSHORE DR.	
		SUITE 703, MIAMI, FL	Remove
		33133	☐ Change
MGR	FERNAN RODRIGUEZ	2665 SOUTH BAYSHORE DR.	= Add
		SUITE 703, MIAMI, FL	□ Remove
		33133	☐ Change
			;
			□ Remove
			□ Change
		T. Q.	Add
			Grante
		3	Add
			Remove
			Change
			☐ Remove
			Change

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Typed or printed name of signed

Filing Fee: \$25.00