118000187104

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	- #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
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COVER LETTER

TO: Registration So Division of Cor		•		
KEYS TO	WING LLC			
NOBJECT.	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	DANIEL HERNADEZ			
		Name of Person		
	KEYS TOWING LLC			
		Firm/Company	•	
	92200 OVERSEAS HWY			<u> </u>
		Address		P 0
	TAVERNHER FLORIDA	33070		A # 22
	KEYSTOWINGLLC@YAI	City/State and Zip Code HOO.COM	·	•
	E-mail address: (to be used for future annual report notif	cation)	
For further information (concerning this matter, please ca	all:		
JOSE IUIS GARBAYO	REY	786 212-6550		
Name (of Person	Area Code Daytime	Telephone Number	
Enclosed is a check for t	he following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified C	of Status &

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

(Name of the Limi	ited Liability Company as it nov (A Florida Limited Liability Co	a appears on our records.) inpany)
The Articles of Organization for this Limited I Florida document number L18000187104	iability Company were filed	d on 08/03/2018 and assigned
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name of	of the limited liability comp	pany here:
The new name must be distinguishable and contain the	words "Limited Liability Compan	ny," the designation "LLC" or the abbreviation "L-L: C"
Enter new principal offices address, if appli		
(Principal office address MUST BE A STRE)		22
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE	<u></u>	
B. If amending the registered agent and registered agent and/or the new registered of		ress on our records, enter the name of the
Name of New Registered Agent:	JOSE LUIS GARBAYO I	REY
New Registered Office Address:	9576 SW 124 CT	
		Enter Florida street address
	MIAMI	, Florida 33186
	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.

Tomber

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>	Type of Action
M	JOSE LUIS GARBAYO REY	9576 SW 124 CT MIAMI FL 33186	
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Affective date, if other than the fan effective date is listed, the date in Note: If the date inserted in this belocument's effective date on the listense.	ust be specific and cannot be pro block does not meet the appl	or to date of filing or mo icable statutory filing	ac than 90 days alter film	g.) Pursuant to 605.0207
e record specifies a delaye The 90th day after the re	ed effective date, but n cord is filed.	ot an effective ti	me, at 12:01 a.m	. on the earlier of
OCTOBER 27	2018			
	· · · · · · · · · · · · · · · · · · ·	· '		
	Signature of a member or aut			

Page 3 of 3

Typed or printed name of signee