## L21000281187

(Requestor's Name)
(Address)
(
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
<b>_</b>
(Business Entity Name)
(Document Number)
Codified Cooles Codificate of Children
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





300373462743

09/20/21--01015--024 \*\*25.00



O SIMMONS SEP 28 2021

## **COVER LETTER**

	on of Corp						
SUBJECT:	Kev	hove LL	c				
	7	N	ame of Li	mited Liability Company			
The enclosed A	rticles of a	Amendment and fee	(s) are su	ibmitted for filing.			
		ndence concerning t					
		GABRIELA SE	TRAKIA	.N			
				Name of Person	<del></del>		
		ARGENTAX L	.C				
		<del></del>	<u></u>	Firm/Company			
		1241 CANARY	ISLAND	) DR			
				Address			
		WESTON, FL 3	3327				
				City/State and Zip Code			
		gabysetrakian@g		(to be used for future annual report n			
For further infor	rmation co	ncerning this matte		·	ionneamony		
Gabriela Setrak		meering till matte	i, prease	786 458-3493			
Name of Person		at ()	time Telephone Number				
	ume or			Mea Code Day	autic Perepuone Number		
Enclosed is a ch	eck for the	following amount:					
≅ \$25.00 Filin	ng Fee	☐ \$30.00 Filing Certificate of		☐ \$55.00 Filing Fee & Certified Copy tadditional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	g Address			<u>Street Address:</u>			
	tration So	ection orporations			Registration Section		
	Box 6327			Division of Corporations The Centre of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

KEY DOVE LLC		##2! SEP 20 PH 5: 50
( <u>Name of the Limited Liabi</u> (A Floric	<mark>lity Company as it now appears o</mark> la Limited Liability Company)	n our records.)
The Articles of Organization for this Limited Liability (Florida document number L21000281187	Company were filed on 66/16	/2021 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here	:
The new name must be distinguishable and contain the words "Lir	mited Liability Company," the design	mation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	ed office address on our reco	rds, <u>enter the name of the new registere</u>
Name of New Registered Agent:		
New Registered Office Address:	P., 19. 11	
	Enter Florida	street address
	<del></del>	, Florida
	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 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 #2185P 20 PH 5: 50	Type of Action
MGR	MARTIN E. CASAS	2700 BISCAYNE BLVD	□Add
		MIAMI, FL 33157	<b>=</b> Remove
			ElChange
			□Add
			□Remove
			ElChange
			□Add
			□Remove
			□Change
			□Add
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			□Remove
			□Change

	3421 SEP 20 PM 5: 50
	₹.
Effective date, if other than the date of filifan effective date is listed, the date must be specific a <b>Note:</b> If the date inserted in this block does no locument's effective date on the Department of	ing:
record specifies a delayed effective date, but n d is filed.	not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
SEPTEMBER 13	- · <sup>20/21</sup> / M
Signature of	a member or authorized representative of a member
	<i>( )</i> –

Filing Fee: \$25.00