

L21000 491143

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

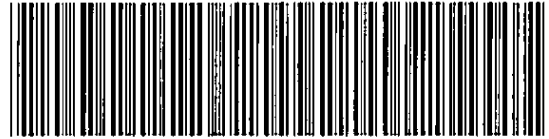
(Document Number)

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03/10/23--0100E--028 **25.00

2023 MAR 10 AM 10:39
STATE
TALLAHASSEE FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NAME CHANGE

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

IAN KEYES

Name of Person

KURTZ KEYES, LLC

Firm/Company

3301 BONITA BEACH RD., STE 311

Address

BONITA SPRINGS, FL 34134

City/State and Zip Code

IAN@KURTZKEYES.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

IAN KEYES

239

253-0055

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2023 MAR 10 AM 10:39
RECEIVED
TALLAHASSEE
FL
DIVISION OF CORPORATIONS

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

KURTZ KEYES, 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 Company were filed on 11/17/2021 and assigned
Florida document number 1.21000491143.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

KEYES HOMES, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

3301 BONITA BEACH RD., STE 311

BONITA SPRINGS, FL 34134

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3301 BONITA BEACH RD., STE 311

BONITA SPRINGS, FL 34134

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

IAN KEYES

New Registered Office Address:

3301 BONITA BEACH RD., STE 311

Enter Florida street address

BONITA SPRINGS, FL

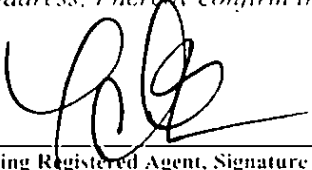
City

, Florida 34134

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 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>	<u>Type of Action</u>
MGR	RANDY KURTZ	111 10TH STREET SOUTH, SUITE 304	<input type="checkbox"/> Add
		NAPLES, FL 34102	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	IAN KEYES	3301 BONITA BEACH RD., STE 311	<input type="checkbox"/> Add
		BONITASPRINGS, FL 34134	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
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			<input type="checkbox"/> Change

SECRET
2023 APR 10 AM 10:39
MAIL ROOM
SUITE 311

2023 MAR 10 AH 10:35
SECURITY
TALLAHASSEE, FL

2023 MAR 10 AM 10:39
SECURITY
FALL 10 10:39 AM

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated MARCH 3 2023

IAN KEYES

Typed or printed name of signee

Filing Fee: \$25.00