

122000459543

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

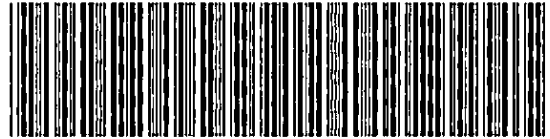
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

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2022 SEP 19 PM 12:00
FILED
U.S. DEPT. OF JUSTICE
FBI - NEW YORK



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 29, 2022

WALTER KEY
628 BETHEL DR
KEYSTONE HEIGHTS, FL 32656

SUBJECT: KEY FAMILY INVESTMENTS, LLC
Ref. Number: W22000097934

We have received your document for KEY FAMILY INVESTMENTS, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date is not acceptable since it is not within five working days of the date of receipt.

Please return the corrected original and one copy of 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) 245-6052.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 722A00016741

2022 SEP 19 PM 12:00
FILED

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Key Family Investments, LLC
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Walter Key

Name of Person

Firm/Company

628 Bethel Dr

Address

Keystone Heights, FL 32656

City/State and Zip Code

walter.key@gmail.com

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

For further information concerning this matter, please call:

Walter Key

757

635-3645

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☒ \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

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

2022 SEP 19 PM 12:00
FILED
TALLAHASSEE, FL

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Key Family Investments, LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

628 Bethel Dr.

Keystone Heights, FL 32656

Mailing Address:

628 Bethel Dr.

Keystone Heights, FL 32656

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Walter Key

Name

628 Bethel Dr

Florida street address (P.O. Box **NOT** acceptable)

Keystone Heights

FL

32656

City

State

Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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.

WALTER KEY

Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED
2022 SEP 19 PM 12:01
CLERK OF COURT
JUDICIAL CIRCUIT IN AND FOR
THE NINTH JUDICIAL CIRCUIT
IN FLORIDA

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

AMBR

Samantha Key
628 Bethel Dr
Keystone Heights, FL 32656

AMBR

Walter Key
628 Bethel Dr
Keystone Heights, FL 32656

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.

ARTICLE VI: Other provisions, if any:

To be held by Walter Key as 50% owner and to be held by Samantha Key as 50% owner

REQUIRED SIGNATURE:

WALTER KEY

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Walter Key

Typed or printed name of signer

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

FILED
2022 SEP 19 PM 12:01
CLERK OF THE COURT
JANUARY 19, 2022