

L24000077836

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

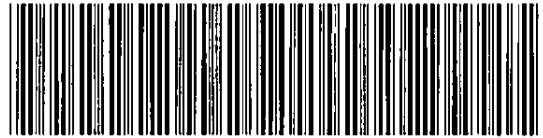
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KEY CORAL LLC

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

ALVARO CASTILLO B., P.A.

Name of Person

CASTILLO & ASSOCIATES

Firm/Company

1390 BRICKELL AVENUE SUITE 200

Address

MIAMI FLORIDA 33131

City/State and Zip Code

alvaro@alvarocastillopa.com

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

For further information concerning this matter, please call:

ALVARO CASTILLO B., P.A.

305

371-5540

at (_____) _____

Name of Person

Area Code & Daytime Telephone Number

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

Enclosed is a check for the following amount:

☐ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 23, 2024

ALVARO CASTILLO B., P.A.
CASTILLO & ASSOCIATES
1390 BRICKELL AVENUE SUITE 200
MIAMI, FL 33131

SUBJECT: KEY CORAL LLC
Ref. Number: L24000077836

We have received your document for KEY CORAL LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a PROFIT CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan
Regulatory Specialist III

Letter Number: 624A00018991

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR
LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 605.0114 or 605.0116, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: KEY CORAL LLC

2. (a) 888 BRICKELL KEY DRIVE, #1700 MIAMI, FL 33131 (b) 888 BRICKELL KEY DRIVE, #1700, MIAMI, FL 33131

Principal office address of limited liability company:

Mailing address of limited liability company:

(Note: MUST BE STREET ADDRESS)

(Note: MAY BE POST OFFICE BOX)

02/15/2024

1.24000077836

3. Date of filing/registration in Florida

4. Document number

5. (a) HALPERN RODRIGUEZ, LLP

Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

355 ALHAMBRA CIRCLE, SUITE 1101

CORAL GABLES, FL 33134

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:

ALVARO CASTILLO B., P.A.

NEW Registered Office Address:

1390 Brickell Ave., Suite 200

Miami, FL 33131

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TALLAHASSEE, FLORIDA
DEPT. OF STATE

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

John Medina
Signature of a member or authorized representative of a member

JOHN MEDINA, MANAGER

Printed or typed name of signee

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.

John Medina
Signature of Registered Agent