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(Re	equestor's Name)	
(Ac	idress)	
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(Ci	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Grouper Key West LLC Name of Foreign Limited Liability Company
Dear Sir or Madam:
The enclosed application, certificate and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
David C. Hagan Name of Person
Firm/Company
2323 Orange Picker Rd. Address
Jacksonville, FL 32223 City/State and Zip Code
Lindaehagan @ Comcast. Net E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call: David C. +a an at (90+) 262-2869 Paytime Telephone Number Area Code & Daytime Telephone Number Paytime Telephone Payti
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building Clifton Building P.O. Box 6327 Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 Tallahassee, Florida 32301
Englosed is a check for the following amount: Substituting See Substituting See & Substi

CR2E055 (9/15)

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT BUSINESS IN FLORIDA

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears	s on the records of the Florida Department of
State: Grouper Key 1	Nest, LLC
Enter new principal office address, if applicable:	2323 Orange Picker Rd.
(<u>Principal office address</u> <u>MUST BE A STREET ADDRESS</u>)	Jacksonville, FL Baga3
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2323 Drange Picker Rd. Jacksonville, FL 32223
2. The Florida document number of this limited lia	bility company is: M1500007274
3. Jurisdiction of its organization:	ida South Carolina
4. Date authorized to do business in Florida:	08 31 2015
SECTION II (5-9 complete only the applicable of	changes)
New name of the limited liability company: (must	t contain "Limited Liability Company, " "L.L.C.," or "LLC.")
	for the purpose of transacting business in Florida and attach a naging members adopting the alternate name. The alternate name" or "LLC.")
6. If amending the registered agent and/or registered registered agent and/or the new registered office ad	d officer address on our records, enter the name of the new ldress here:
Name of New Registered Agent: Lindo	E. Hagan
New Registered Office Address: 2323	Orange Picker Rd. Fin w Enter Florida Street Address
70	City, Florida 3223 Zip Code
the provisions of all statutes relative to the proper and accept the obligations of my position as registe document is being filed to merely reflect a change liability company has been notified in writing of the	nt and agree to act in this capacity. I further agree to comply with and complete performance of my duties, and I am familiar with ered agent as provided for in Chapter 605, F.S. Or, if this in the registered office address, I hereby confirm that the limited

Title/ Capacity	<u>Name</u>	Address Type of Actio
n e mr	David C. Hagan	2323 Orange Picker Rol Madd Jacksonville, FL 32223
<u>JMB</u> R	Evan Tingley	2824 Patterson Aue. Dadd Key West, FL 33040
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Filing Fee: \$25.00