

M19000001383

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

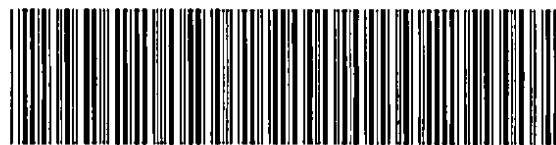
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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APPROVED
AND
FILED
2019 APR 30 AM 8:37
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

RECEIVED
19 APR 30 PM 3:25
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS
SECRETARY OF STATE

T GLASS

MAY 01 2019

SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive, Tallahassee, Florida 32312

(850) 656-4724

DATE 4/30/2019

****WALK IN****

ENTITY NAME UPPER KEYS MARINE CONSTRUCTION, LLC

DOCUMENT NUMBER M19000001383

****PLEASE FILE THE ATTACHED AND RETURN****

XXXXXX

Plain Copy

Certified Copy

Certificate of Status

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AND
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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certificate of Good Standing

****APOSTILLE' / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED 25.00

CHECK # 6069

Please call Tina at the above number for any issues or concerns. Thank you so much!

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Upper Keys Marine Construction, 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:

Michael Jones

Name of Person

Upper Keys Marine Construction, LLC

Firm/Company

PO Box 372790

Address

Key Largo, FL 33037

City/State and Zip Code

michael@lakewoodgrowth.com

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

For further information concerning this matter, please call:

Michael Jones at 512 578-5417
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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TALLAHASSEE, FLORIDA
CLERK OF CIRCUIT COURT

**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: Upper Keys Marine Construction, LLC

2. (a) Principal office address of limited liability company:
(Note: MUST BE STREET ADDRESS)

97674 Overseas Hwy

Key Largo, FL 33037

(b) Mailing address of limited liability company:
(Note: MAY BE POST OFFICE BOX)

PO Box 372790

Key Largo, FL 33037

2/7/2019

M19000001383

3. Date of filing/registration in Florida

4. Document number

5. (a) Mike Jones

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

Upper Keys Marine Construction, LLC

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

97674 Overseas Hwy

Key Largo, FL 33037

(b) Michael Jones

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

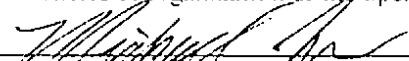
Upper Keys Marine Construction, LLC

NEW Registered Office Address:

97674 Overseas Hwy

Key Largo, FL 33037

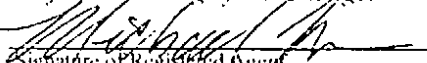
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida 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.


Signature of a member or authorized representative of a member

Michael Jones

Printed or typed name of signer

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.


Signature of Registered Agent

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314
FILING FEE: \$25.00

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CLERK OF STATE