

N17000012137

Florida Department of State
Division of Corporations
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To:

Division of Corporations
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From:

Account Name : SHUTTS & BOWEN, LLP
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Phone : (305) 358-9166
Fax Number : (305) 347-7766

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Email Address: GCohen@shutts.com

**REGISTERED AGENT CHANGE
FLORIDA KEYS COMMUNITY LAND TRUST, INC.**

Certificate of Status	0
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Page Count	01
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STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida _____ in order to change its registered office or registered agent, or both, in the State of Florida

1. The name of the corporation: Florida Keys Community Land Trust Inc.
2. The principal office address: 19308 SW 380TH STREET, FLORIDA CITY, FL 33034
3. The mailing address (if different): P.O. BOX 343529, FLORIDA CITY, FL 33034
4. Date of incorporation/qualification: 12/07/2017 Document number: N17000012137
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

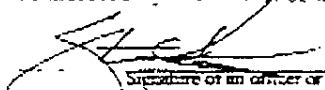
SHUTTS & BOWEN, LLP200 SOUTH BISCAYNE BOULEVARD, SUITE 4100 (GJC)MIAMI, FL 33131

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Corporation Company of Miami200 S. Biscayne Blvd, Suite 4100 (GJC)P.O. Box NOT acceptableMiami, FL 33131

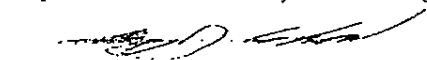
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


Signature of an officer or director

STEVEN KILL, PRESIDENT
Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


Signature of Registered Agent

January 4, 2021

Date

If signing on behalf of an entity:

Gary J. Cohen, Vice President

Typed or Printed Name

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR25045 (04/13)

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