N95000004398

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
· · · · · · · · · · · · · · · · · · ·	
PICK-UP WAIT MA	IL
(Dunings Estite Manne)	
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
4	}
	ŀ
	Ì
	}

Office Use Only



100353338961

10/08/20--01005--004 **35.00

RARCICH

NOV 15 2020 I ALBRITTON TO: Amendment Section
Division of Corporations

SUBJECT: Key Haven Park and Recreation Inc.

Name of Corporation

DOCUMENT NUMBER: NOSOOO 439 9

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

JESSICA BIOUSS
Name of Contact Person

Firm/Company

2 Floral Ave.

Address

Key West FL 33040

City/State and Zip Code

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

For further information concerning this matter, please call:

Jessica Blass at 305 393 2618

Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

CR2E045 (04/13)

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: Key Haven Parks and Recreation Inc.
2. The principal office address: 3 Beech wood Drive
Key West FL 33040
3. The mailing address (if different):
4. Date of incorporation/qualification: 9/14/1995 Document number: N9500004395
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)
Greta Philips-Ford
3 Beechwood Drive
Key West, FL 33040
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
(if changed): Jessica Blass
2 Floral Ave
P.O. Box NOT acceptable
_ Key West, FL 33040_
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 or an officer or director Grate Ethilps-Ford 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 10/6/2020 Date
If signing on behalf of an entity:
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 CR2E045 (04/13)