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TALLAHASSEE, FLORIDA

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ALBRITTON

COVER LETTER

TO: Amendment Section
Division of Corporations

NAME OF CORPORATION: KEYS MOVERS, INC.

DOCUMENT NUMBER: _____

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

PAVLA BOAN

Name of Contact Person
KEYS MOVERS, INC.

Firm/ Company
S COCONUT DRIVE

Address
KEY WEST, FLORIDA, 33040

City/ State and Zip Code

KEYSMOVERS1@AOL.COM

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

For further information concerning this matter, please call:

PAVLA BOAN at (305) 896-8281

Name of Contact Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

- | | | | |
|---|--|---|--|
| <input checked="" type="checkbox"/> \$35 Filing Fee | <input type="checkbox"/> \$43.75 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$43.75 Filing Fee &
Certified Copy
(Additional copy is
enclosed) | <input type="checkbox"/> \$52.50 Filing Fee
Certificate of Status
Certified Copy
(Additional Copy
is enclosed) |
|---|--|---|--|

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

Articles of Amendment
to
Articles of Incorporation
of

KEYS MOVERS, INC.

(Name of Corporation as currently filed with the Florida Dept. of State)

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

A. If amending name, enter the new name of the corporation:

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co." A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

B. Enter new principal office address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)

PAVLA BOAN

8 COCONUT DRIVE

KEY WEST, FLORIDA, 33040

C. Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

KEYS MOVERS, INC.

8 COCONUT DRIVE

KEY WEST, FLORIDA, 33040


D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:

Name of New Registered Agent PAVLA BOAN
8 COCONUT DRIVE
(Florida street address)

New Registered Office Address: KEY WEST, Florida 33040
(City) (Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.


Signature of New Registered Agent, if changing

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TALLAHASSEE, FLORIDA

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change. Mike Jones leaves the corporation. Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example:

☒ Change PT John Doe
☒ Remove V Mike Jones
☒ Add SV Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <input type="checkbox"/> Change	VP	IVO VALECEK	17 KEY HAVEN TERRACE
<input type="checkbox"/> Add			KEY WEST, FL. 3304
<input checked="" type="checkbox"/> Remove			
2) <input type="checkbox"/> Change	RA	IVO VALECEK	17 KEY HAVEN TERRACE
<input type="checkbox"/> Add			KEY WEST, FL. 33040
<input checked="" type="checkbox"/> Remove			
3) <input type="checkbox"/> Change	ADDRE	KEYS MOVERS, INC.	801 EISENHOWER DRIVE
<input type="checkbox"/> Add			KEY WEST, FL. 33040
<input type="checkbox"/> Remove			
4) <input type="checkbox"/> Change	ADDRE	KEYS MOVERS, INC.	8 COCONUT DRIVE
<input checked="" type="checkbox"/> Add			KEY WEST, FL. 33040
<input type="checkbox"/> Remove			
5) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			
6) <input type="checkbox"/> Change			
<input type="checkbox"/> Add			
<input type="checkbox"/> Remove			

E. If amending or adding additional Articles, enter change(s) here:

(Attach additional sheets, if necessary). (Be specific)

*PLEASE REMOVE IVO VALECEK. HE LEFT THE COMPANY

*PLEASE CHANGE EVERYTHING TO A NEW ADDRESS: KEYS MOVERS, INC. 8 COCONUT DRIVE, KEY WEST
FLORIDA, 33040

*PLEASE INDICATE PAVLA BOAN AS PRESIDENT AND REGISTERED AGENT

F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,
provisions for implementing the amendment if not contained in the amendment itself;
(if not applicable, indicate N/A)

Page 3 of 4

The date of each amendment(s) adoption: 12/09/2019, if other than the
date this document was signed.

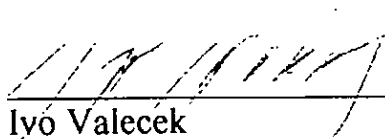
Effective date if applicable: _____
(no more than 90 days after amendment file date)

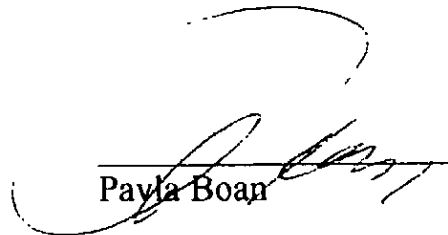
STOCK TRANSFER

For and in consideration of ten dollars (\$10) and other good and valuable consideration in hand received and exchanged, Ivo Valecek (DOB 06/13/1969) does hereby transfer, sell and convey all of his shares and interest in Keys Movers, Inc. (EIN/FEI 65-1081330) to Pavla Boan (DOB 07/03/1967) and hereby represents that the shares transferred hereunder are free and clear of all liens and encumbrances and further does represent that with the transfer of his shares hereunder, Pavla Boan is the sole owner of all of the shares and all assets of Keys Movers, Inc.

Ivo Valecek is hereby released of all obligations relating to the company as of December 9, 2019.

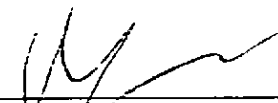
Dated December 9, 2019

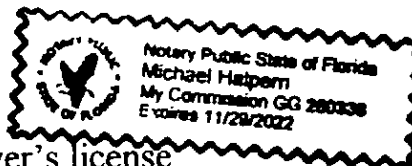

Ivo Valecek


Pavla Boan

STATE OF FLORIDA
COUNTY OF MONROE

The foregoing instrument was acknowledged before me this 9th day of 2019, by Ivo Valecek and Pavla Boan.


Signature of Notary Public



Produced Identification: Florida's driver's license

Type of Identification Produced: #V-422-400-69-213-0 (Ivo Valecek) and #B-500-660-67-473-0 (Pavla Boan)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Adoption of Amendment(s) **(CHECK ONE)**

☒ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.

☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval

by _____."
(voting group)

☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

☐ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 12/09/2019

Signature

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

PAVLA BOAN, P

(Typed or printed name of person signing)

IVO VALECEK, VP

(Title of person signing)