

P980000012001

KEY WEST KEY, INC.  
726 PASSOVER LN.  
KEY WEST, FL 33040

City/State/Zip

Phone #

Office Use Only

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
2. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
3. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)
4. \_\_\_\_\_ (Corporation Name) \_\_\_\_\_ (Document #)

98 NOV 25 AM 10:20  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

- ☐ Walk in      ☐ Pick up time \_\_\_\_\_      ☐ Certified Copy  
☐ Mail out      ☐ Will wait      ☐ Photocopy      ☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/ Director
<input checked="" type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

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\*\*\*\*\*35.00 \*\*\*\*\*35.00

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

12-1-98

Examiner's Initials

CC



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham  
Secretary of State

September 28, 1998

KEY WEST KEY, INC.  
726 PASSOVER LANE  
KEY WEST, FL 33040

SUBJECT: KEY WEST KEY, INC.  
Ref. Number: P98000012001

We have received your document for KEY WEST KEY, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6903.

Cheryl Coulliette  
Document Specialist

Letter Number: 698A00048516

**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, the undersigned corporation organized under the laws of the State of FLORIDA submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation is: KEY WEST KEY, INC.

2. The mailing address of the corporation is: 726 PASSOVER LN. KEY WEST, FL 33040

3. Date of incorporation/qualification: FEB. 6, 1998 Document number: P98000012001

4. The name and address of the current registered agent and office:

AMERI LAWYER  
343 ALMERIA AVE.  
CORAL GABLES, FL 33134

5. The name and address of the new registered agent and office: (P.O. Box Not Acceptable)

SUSAN RODNON  
726 PASSOVER LN.  
KEY WEST, FL 33040

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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.

Robert L. McNeal  
(Signature of an officer, chairman or vice chairman of the board)

SEP. 16, 1998  
(Date)

ROBERT L. McNEAL - VICE PRESIDENT  
(Printed or typed name and title)

Having been named as registered agent and to accept service of process for the above stated corporation, 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.

Robert L. McNeal  
(Signature of Registered Agent)

SEP. 16, 1998  
(Date)

If signing on behalf of an entity:

ROBERT L. McNEAL  
(Typed or Printed Name)

VICE PRESIDENT  
(Capacity)