V18077

(Requestor's Name)					
(Address)					
(Ad	dress)				
(Cit	y/State/Zip/Phone	· #)			
PICK-UP	☐ WAIT	MAIL			
(Pu	sinese Entity Nan	20)			
(Business Entity Name)					
(Document Number)					
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RA Change T. Lewis



05/23/05--01014--006 **35.00

COVER LETTER

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TO:	Amendment Section Division of Corporations				
SUBJ	ECT: Key Financial Corporation (Name of corporation)				
DOC	UMENT NUMBER: V18077				
The er	aclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.				
Please return all correspondence concerning this matter to the following:					
	Eric Wolz (Name of contact person)				
Wolz Corporate USA, Inc. (Firm/Company)					
5146 Goshawk Street (Address)					
	Brighton, CO 80601 (City/state and zip code)				
For fu	rther information concerning this matter, please call:				
Eric W					
	(Name of contact person) (Area code & daytime telephone number)				
Enclos	sed is a \$35.00 check made payable to the Department of State.				
	Mailing Address:Street Address:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327409 E. Gaines StreetTallahassee, FL 32314Tallahassee, FL 32399				

CR2E045(6/04)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

يه سر المعملة

statement of change	is submitted for a corporation organ	02, 607.1508, or 617.1508, Florida Statu nized under the laws of the State of Florid tered agent, or both, in the State of Floric	da
1. The name of the o	corporation: Key Financial Corporati	ion	
2. The principal office	ce address: 3631 131st Ave. N., Cle	earwater, FL 33762	
3. The mailing addre	ess (if different):		
4. Date of incorpora	tion/qualification: 03/30/1992	Document number: V18077	
5. The name and stree Florida Department		agent and registered office on file with the	e Fig. S
NR.	Al Services, Inc.		鼠夏四
273	11 Executive Park Drive, Suite 4		23 [
We	eston, FL 33331		里
6. The name and stre (if changed):	eet address of the new registered age	nt (if changed) and /or registered office	5
Re	gistered Agent Solutions, inc.		
133	33 N. Duval Street		
	(P.O. Box NOT acceptable	r)	•
Tal	ahassee, FL 32303		۷ ـ
The street address o as changed will be i	of its registered office and the street dentical.	address of the business office of its reg	gistered agent,
Such change was au authorized by the bo	uthorized by resolution duly adopte oard, on the corporation has been no	d by its board of directors or by an offi- otified in writing of the change.	cer so
(Signature of	an on er or director)	Lynn Rushmore, President (Printed or typed name and title)	
I hereby accept the I further agree to co of my duties, and I a document is being for poration has been	appointment as registered agent ar omply with the provisions of all sta am familiar with and accept the ob- iled merely to reflect a change in the on notified in writing of this change	nd agree to act in this capacity, tutes relative to the proper and complet ligation of my position as registered ag ne registered office address, I hereby co	e performance ent. Or, if this onfirm that the
Den Prouse (Signatur	re of Registered Agent)	4/2 9 /2005 (Date)	
If signing on behalf	of an entity:	1 (
Sean Prewitt, Assist	tant Secretary		
(Tyned	or Printed Name)		

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