

LD9000006443

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

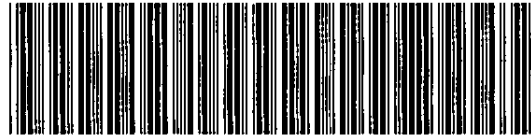
(Business Entity Name)

(Document Number)

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12 OCT -8 PM 4: 46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: KИPEPEO LLC**  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**ALLAN KOLTUN**  
Name of Person

**ALLAN KOLTUN CPA PA**  
Firm/Company

**1717 N BAYSHORE DRIVE #116**  
Address

**MIAMI FL 33132**  
City/State and Zip Code

**AKOLTUN@BELLSOUTH.NET**  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**ALLAN KOLTUN** at ( **305** ) **374-0041**  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 20, 2012

ALLAN KOLTUN CPA PA  
1717 N. BAYSHORE DRIVE #116  
MIAMI, FL 33132

SUBJECT: KIPEPEO, LLC  
Ref. Number: L09000006443

We have received your document for KIPEPEO, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Manager Maria name is not complete.

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) 245-6051.

Neysa Culligan  
Regulatory Specialist II

Letter Number: 812A00023630

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

FILED

12 OCT -8 PM 4:46

KIPEPEO LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 01/21/2009 and assigned  
Florida document number L09000006443.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

1680 MICHIGAN AVENUE #910

(Principal office address MUST BE A STREET ADDRESS)

MIAMI BEACH FL 33139

Enter new mailing address, if applicable:

1680 MICHIGAN AVENUE #910

(Mailing address MAY BE A POST OFFICE BOX)

MIAMI BEACH FL 33132

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

GIORGIO PICINELLI

New Registered Office Address:

1680 MICHIGAN AVENUE #910

*Enter Florida street address*

MIAMI BEACH

, Florida

33139

*City*

*Zip Code*

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

*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 obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.*

*X*  
Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager  
MGRM = Managing Member

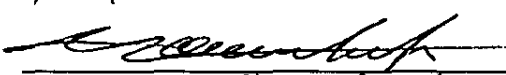
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	MICHAEL FALSETTO	1717 N BAYSHORE DRIVE #102 MIAMI FL 33132	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	GIANFRANCO MANENTI	1680 MICHIGAN AVENUE #910 MIAMI BEACH FL 33139	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	MARIA ANTONIETTA FARINATO	1680 MICHIGAN AVENUE #910 MIAMI BEACH FL 33139	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<del>MGR</del>	<del>Maria Antonietta FARINATO</del>		
MGR	FABRIZIO MANENTI	1680 MICHIGAN AVENUE #910 MIAMI BEACH FL 33139	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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 FILED  
 CLERK OF STATE  
 TALLAHASSEE, FLORIDA

Dated 09/13/2012



Signature of a member or authorized representative of a member

Gianfranco Manenti

Typed or printed name of signee