# M11000003735

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(City/State/Zip/Phone #)		
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		
Ams	rd .	

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SECRETARY OF STATE
TALL/HASSICLELORID

T. Burch DEC 3 0 2013

#### **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT

# Keratin Labs Enterprises, 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:

# Lloyd Howard

Name of Person

# Keratin Labs Enterprises, LLC

Firm/Company

101 Briny Ave. Ste 1404

Address

# Pompano Beach, Fl. 33062

City/State and Zip Code

#### Ihoward@keratincomplex.com

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

For further information concerning this matter, please call:

### Lloyd Howard

561 206-6050

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



December 11, 2013

LLOYD HOWARD 101 BRINY AVE STE 1404 POMPANO BEACH, FL 33062

SUBJECT: KERATIN LABS ENTERPRISES, LLC

Ref. Number: M11000003735

We have received your document for KERATIN LABS ENTERPRISES, 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):

You submitted the wrong type of form, proper forms are enclosed.

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.

Letter Number: 913A00028211

Tim Burch Regulatory Specialist II

www.sunbiz.org

District of Commentions D.O. DOV 0007 Wellshooms Florida 2001

# AFFIDAVIT BY FOREIGN LIMITED LIABILITY COMPANY TO CHANGE MANAGER(S) OR MANAGING MEMBER(S)

1. The name of the limited liability compar Department of State is: KERATIN LAGS	ny as it appears on the records of the Florida
2. This entity was formed under the laws o	^
3. This entity was authorized to transact bu and its Florida document/registration number	ario M Uzzzz abot
<u>.</u>	
4. The name and address of each manager of	or managing member is as follows:
<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	PAR ST
MER	MELVYN G. HOWARD BA B
	BOCA RATED FL 33487
MGR	SHELLY BLOOM
	BOCA RATON FL. 33487
MGR	MARIO ARGENTI
	BOCA RATON, FL. 23487
-	
<del></del>	
Required Signature:	
Signature of Manager	Managing Member or Member

Filing Fee: \$25