L0900006443

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ALLAMASSEE, FLORID

COVER LETTER

TO:	Registration Sec Division of Corp			
SUBJE	·CT·	KIPE	EPEO LLC	
SOBIL			ed Liability Company	
The en	closed Articles of A	mendment and fee(s) are sub-	mitted for filing.	•
Please	return all correspon	dence concerning this matter	to the following:	
			ALLAN KOLTUN	
			Name of Person	
		ALL	AN KOLTUN CPA PA	
			Firm/Company	· · · · · · · · · · · · · · · · · · ·
		1717 N	BAYSHORE DRIVE #116	3
			Address	·
MIAMI FL 33132				
			City/State and Zip Code	
	AKOLTUN@BELLSOUTH.NET E-mail address: (to be used for future annual report notification)			
For fiv	ethar information of	oncerning this matter, please c	·	,
roi iu	ruler information ec	meening this matter, please c	an.	
	ALL	AN KOLTUN	at (_305)	374-0041
	Name of	`Person	Area Code & Daytir	ne Telephone Number
Enclos	sed is a check for th	e following amount:		
₹ \$2	5.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclose	\$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



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.

Letter Number: 812A00023630

Neysa Culligan Regulatory Specialist II

www.sunbiz.org

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

12 OCT -8 PM 4: 45

(Name of the Limited Liabil (A Florid	KIPEPEO LLC ity Company as it now appears of a Limited Liability Company)	Λi	LURLTARY OF STATE LLAHASSEE, FLORID
The Articles of Organization for this Limited Liability Florida document number L0900006443	Company were filed on	01/21/2009	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the li	mited liability company here:		
The new name must be distinguishable and end with the v "L.L.C."	words "Limited Liability Company,	" the designation "	LLC" or the abbreviation
Enter new principal offices address, if applicable:	1680 MICHIGAI	N AVENUE #9	10
(Principal office address MUST BE A STREET AD	DRESS) MIAMI BEACH	FL 33139	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1680 MICHIGAI MIAMI BEACH		10
B. If amending the registered agent and/or registered agent and/or the new registered office a		records, enter	the name of the new
Name of New Registered Agent: Gl	ORGIO PICINELLI		
New Registered Office Address: 16	80 MICHIGAN AVENUE #9 Enter	910 Florida street add	dress
	MIAMI BEACH	, Florida	33139
	City		Zip Code
New Registered Agent's Signature, if changing Register	ered 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.

If Changing Registered Agent, 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 = N	Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	MICHAEL FALSETTO	1717 N BAYSHORE DRIVE #102 MIAMI EL 33132	Add ✓ Remove
MGR_	GIANFRANCO MANENTI	1680 MICHIGAN AVENUE #910 MIAMI BEACH FL 33139	
MGR	MARIA ANTONIETTA FAR MARA MATORICALA FARINATO	1680 MICHIGAN AVENUE #910 MIAMI BEACH EL 33139	✓ Add Remove
MGR	FABRIZIO MANENTI	1680 MICHIGAN AVENUE #910 MIAMI BEACH FL 33139	Add ☐ Remove
			Add Remove
			Add Remove
D. If amer	nding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary	v.)
	09/13/8012.		FILED 12 OCT -8 PH 4: 46 LUCANTARY OF STATE ALLAHASSEE, FLORIDA
•	- Country		
	() and solu	er or authorized representative of a member One name of signee	

Page 2 of 2

Filing Fee: \$25.00