

L06000110512

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

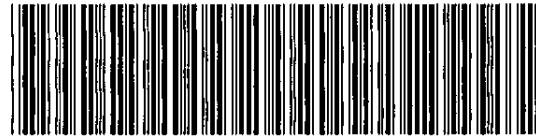
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

DEC 11 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SKD INVESTMENTS, 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:

HAKAN AKSU
Name of Person
SKD & REINA INVESTMENTS, LLC.
~~KEREA DURUST INVESTMENTS, LLC~~
Firm/Company
1040 ALTON RD, MIAMI BEACH
Address
MIAMI BEACH, FL 33139
City/State and Zip Code
hakanlimo@gmail.com
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

HAKAN AKSU at (305) 467-8558
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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

SKD INVESTMENTS, LLC.

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

The Articles of Organization for this Limited Liability Company were filed on Miami Beach, FL and assigned
Florida document number LO 6000110512

This amendment is submitted to amend the following:

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

~~KEELT DORUS INVESTMENTS, LLC~~ SKD & REINA INVESTMENTS, LLC
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:

(Principal office address MUST BE A STREET ADDRESS)

1040 ALTON ROAD
MIAMI BEACH
FLORIDA 33139

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1040 ALTON ROAD
MIAMI BEACH
FLORIDA 33139

**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:

HAKAN AKSU

New Registered Office Address:

1040 ALTON ROAD
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.

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 = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	HAKAN AKSU	1040 ALTON RD. 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
			<input 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.)

Dated December 7, 2009.

Signature of a member or authorized representative of a member

HAKAN AKSU

Typed or printed name of signee

KAREN DURUST

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TALLAHASSEE, FLORIDA