## L08000050517

(Re	equestor's Name)	
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## **COVER LETTER**

O: Registration Se	, varion
Division of Cor	
KM 8	JP Investment, LLC
SUBJECT: TXIVI O	Name of Limited Liability Company
The enclosed Articles of	Amendment and fee(s) are submitted for filing.
Please return all correspo	ondence concerning this matter to the following:
	Juan Perez
	Name of Person
	KM & JP Investment, LLC
	Firm/Company
	11547 N Kendall Drive
	Address
	Miami, FL 33176
	City/State and Zip Code
	tropical809@gmail.com
	E-mail address: (to be used for future annual report notification)
For further information c	oncerning this matter, please call:
Juan Perez	2305 <sub>.</sub> 2754705
Name o	f Person Area Code Daytime Telephone Number
Enclosed is a check for the	he following amount:
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Fil

MAILING ADDRESS:

Certificate of Status

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

## STREET/COURIER ADDRESS:

Certificate of Status & Certified Copy

(additional copy is enclosed)

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Certified Copy

(additional copy is enclosed)



May 15, 2014

JUAN PEREZ 11547 N. KENDALL DRIVE MIAMI, FL 33176

SUBJECT: KM & JP INVESTMENT LLC

Ref. Number: L08000050517

We have received your document for KM & JP INVESTMENT 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):

The effective date must be specific and cannot be prior to the date of filing.

The Amendment was reveived on 05/08/14.

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: 014A00010484

www.sunbiz.org

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED 7814 HAY -8 PH 3: 15

SECRETARY OF STATE TALLAHASSEE, FLORIDA

<b>KM &amp;</b>	JP	INV	/ESTI	MENT	, LLC
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(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 Co	ompany were filed on 05/20/2008	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ted liability company here:	
The new name must be distinguishable and end with the words "Lin	nited Liability Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	<u>'ESS)</u>	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regist registered agent and/or the new registered office addi	tered office address on our record ress here:	s, <u>enter the name of the new</u>
Name of New Registered Agent:		V-4
New Registered Office Address:	Enter Florida street addres	
	Emer r tortaa ştreet addres	55
	City , FI	orida
N B (	- Chy	zip Coae

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 605, 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 Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
MGR	CAROL AROSTEGUI	11547 N KENDALL DRI	VE_BAdd
		MIAMI, FL 33176	Remove
<del></del>			□ Add
			☐ Remove
			□ Add
			□ Remove
			Add
			□ Remove
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			□ Remove

),	If amending any other information, enter c	hange(s) here: (Attach additional sheets.	if necessary.)
	, •		
			<del></del>
	Effective date, if other than the date of filing	g: 05/08/2014	(optional)
	(The effective date must be specific, cannot be prior to de the date this document is filed by the Florida Departmen	are or receipt of theo core and campot of those man	0 days after
	Dated 05/06	2014	
	Date)	,	
	Signature of a	member or authorized representative of a member	
		Typed or printed name of signer	

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Filing Fee: \$25.00

