

LO9000078360

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

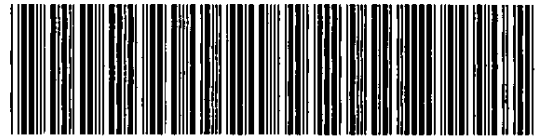
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. HAWKES

AUG 25 2009

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: EK+M EURO 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:

LEONARD LEVINE

Name of Person

LEVINE + ASSOCIATES

Firm/Company

7805 NW BEACON SQ BLVD #201

Address

BOCA RATON, FL 33487

City/State and Zip Code

LENNY@LM-CPA.COM

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

For further information concerning this matter, please call:

LEONARD LEVINE

Name of Person

at (561) 999-1982 X303

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

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>
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove
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09 AUG 24 PM 2:30
SECRETARY OF STATE
MILWAUKEE

FILED

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

Dated August 19, 2009

LEONARD W. LEVINE
Signature of a member or authorized representative of a member
LEONARD W. LEVINE
Typed or printed name of signee