

2012 LIMITED LIABILITY COMPANY AMENDED ANNUAL REPORT

**FILED
Jun 01, 2012
Secretary of State**

DOCUMENT# L11000030636

Entity Name: TRUEKEINN, LLC

Current Principal Place of Business:

913 MEDINA AVE
CORAL GABLES, FL 33134

New Principal Place of Business:

Current Mailing Address:

913 MEDINA AVE
CORAL GABLES, FL 33134

New Mailing Address:

FEI Number: 45-5398682 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ALLIEGRO, EDUARDO
913 MEDINA AVE.
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

MANAGING MEMBERS/MANAGERS:

Title: MGR
Name: ALLIEGRO, EDUARDO
Address: 913 MEDINA AVE
City-St-Zip: CORAL GABLES, FL 33134

Title: MGR
Name: MORALES, CARLOS T
Address: 913 MEDINA AVE
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: EDUARDO ALLIEGRO MGR 06/01/2012

_____ Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date