

T-081 P0001/0014 F-305





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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ESKO PROPERTIES, INC.

Account Number : I20040000075 Phone

: (561)833-4211

Fax Number

: (561)833-3694

\*\*Enter the email address for this business entity to be used for Muture annual report mailings. Enter only one email address please.\*\*

Email Address: esko@eskohl.com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN K PRIVATE INVESTMENTS 2013 LLC

| Certificate of Status | 0       |
|-----------------------|---------|
| Certified Copy        | 0       |
| Page Count            | 01      |
| Estimated Charge      | \$25.00 |

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**B. KOHR** 

4130000:



January 22, 2013

FLORIDA DEPARTMENT OF STATE

Division of Corporations

K PRIVATE INVESTMENTS 2013 LLC 340 ROYAL POINCIANA WAY STE 305

PALM BEACH, FL 33480

SUBJECT: K PRIVATE INVESTMENTS 2013 LLC

REF: L13000005287

We have received your electronically transmitted document. However, the document was submitted under the wrong electronic filing type and cannot be processed by this office.

To proceed, you must abandon this filing and resubmit your filing under the appropriate electronic filing type.

Please send this is with a Florida LLC Amendment coversheet.

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.

Buck Kohr Regulatory Specialist II FAX Aud. #: H13000014203 Letter Number: 713A00001534

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## **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: K Private Invastmans

Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Articles of Correction and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Tanta C Jentins

Name of Person

K Private Invastmans 2013 H

Firm/Company

340 Rayal Paincasa Way Sta 30

Address

Palm Beach FL 33480

City/State and Zip Code

ESKO @ CSWON COM

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

For further information concerning this matter, please call:

Moira Bextrand at 561 833 42-11

Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

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

Enclosed is a shock for the following amount:

\$25 Filling Fee

☐ \$30 Filing Fee & Certificate of Status □ \$55 Filing Fee & Certified Copy

□ \$60 Filing Fee, Certificate of Status & Certified Copy

CR26062 (08/05)

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| K Privade Inves  | AMON42 2013   | 3 LLC   |
|--|---|---|
| (Name of the Limited Liabil<br>(A Florid:  | ity Company as it now appears<br>a Limited Liability Company) | on our records.                               |
| The Articles of Organization for this Limited Liability  | Company were filed on   | 110113 And assigned                           |
| Florida document number 113000005  |   |   |
| This amendment is submitted to amend the following:  |   |   |
| A. If amending name, enter the new name of the li  | mited liability company here                                  | · Fr  |
| The new name must be distinguishable and end with the w"L.L.C."  | ords "Limited Liability Compan                                | y," the designation "LLC" or the abbreviation |
| Enter new principal offices address, if applicable:  |   |   |
| (Principal office address MUST BE A STREET ADI   | ORESS)  |   |
|  |   |   |
| Enter new mailing address, if applicable:  |   |   |
| (Mailing address MAY BE A POST OFFICE BOX)   |   |   |
| •  |   |   |
| B. If amending the registered agent and/or reg<br>registered agent and/or the new registered office ad | istered office address on ou<br>ldress here;                  | r records, <u>enter the name of the new</u>   |
| Name of New Registered Agent:  |   |   |
| New Registered Office Address:   |   | -   |
|  | Ente  | r Florida street address                      |
|  | City  | , Florida<br>Zip Code                         |
|  | City  | гір Соағ                                      |

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

01-23-113 10:16 FROM-

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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

| Title | <u>Name</u>    | Address             | Type of Action |
|-------|----------------|---------------------|----------------|
| MGRM  | Foko Inc       | 340 Royal Poinciana | _ DAdd         |
|       | ٠              | Way Ste 305         |                |
|       |                | Palm Beach Fl 334   | 80             |
| M6R   | James C Terkin | o                   | Add            |
|       |                | nt                  | Remove         |
|       |                |                     | ·              |
|       |                |                     | Add            |
|       |                |                     | Remove         |
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|       |                |                     | Remove         |
|       |                | <u> </u>            | <del></del>    |
|       | ·              |                     | Add            |
|       | •              |                     | Remove         |
|       |                |                     |                |

| mending | any other information, enter change(s) here: (Attach additional sheets, if necessary.) |
|---------|--|
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|         | ,,   |
|         | $\sim 1$   |
|         | Signature of a member or authorized representative of a member                         |
|         | James C. Jenkins   |
|         | James C. Jenkins Typed or printed name of signee                                       |
|         |  |

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Filing Fee: \$25.00

IRS DEPARTMENT OF THE TREASURY
INTERNAL REVENUE SERVICE
CINCINNATI OH 45999-0023

Date of this notice: 01-10-2013

Employer Identification Number: 46-1736200

Form: S5-4

Number of this notice: CP 575 B

K PRIVATE INVESTMENTS 2013 LLC JAMES C JENKINS MBR 340 RYL POINCIANA WAY STE 305 PALM BEACH, FL 33480

For assistance you may call us at: 1-800-829-4933

IF YOU WRITE, ATTACH THE STUB AT THE END OF THIS NOTICE.

## WE ASSIGNED YOU AN EMPLOYER IDENTIFICATION NUMBER

Thank you for applying for an Employer Identification Number (EIN). We assigned you EIN 46-1736200. This EIN will identify you, your business accounts, tax returns, and documents, even if you have no employees. Please keep this notice in your permanent records.

When filing tax documents, payments, and related correspondence, it is very important that you use your EIN and complete name and address exactly as shown above. Any variation may cause a delay in processing, result in incorrect information in your account, or even cause you to be assigned more than one EIN. If the information is not correct as shown above, please make the correction using the attached tear off stub and return it to us.

Based on the information received from you or your representative, you must file the following form(s) by the date(s) shown.

Form 1065 04/15/2014

If you have questions about the form(s) or the due date(s) shown, you can call us at the phone number or write to us at the address shown at the top of this notice. If you need help in determining your annual accounting period (tax year), see Publication 538, Accounting Periods and Methods.

We assigned you a tax classification based on information obtained from you or your representative. It is not a legal determination of your tax classification, and is not binding on the IRS. If you want a legal determination of your tax classification, you may request a private letter ruling from the IRS under the guidelines in Revenue Procedure 2004-1, 2004-1 I.R.S. 1 (or superseding Revenue Procedure for the year at issue). Note: Certain tax classification elections can be requested by filing Form 8832, Entity Classification Election. See Form 8832 and its instructions for additional information.

A limited liability company (LLC) may file Form 8832. Entity Classification Election, and elect to be classified as an association taxable as a corporation. If the LLC is eligible to be treated as a corporation that meets certain tests and it will be electing S corporation status, it must timely file Form 2553, Election by a Small Business Corporation. The LLC will be treated as a corporation as of the effective date of the S corporation election and does not need to file Form 8832.

To obtain tax forms and publications, including those referenced in this notice, visit our Web site at www.irs.gov. If you do not have access to the Internet, call 1-800-829-3676 (TTY/TDD 1-800-829-4059) or visit your local IRS office.