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13 JUN 25 PM 3:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
EXAMINER  
JUN 26 2013

## COVER LETTER

TO: **Registration Section**  
**Division of Corporations**

SUBJECT: **GREENECO 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:

**William Pizzorni**

Name of Person

**Greeneco Investments, LLC**

Firm/Company

**1111 Kane Concourse , suite 410**

Address

**Bay Harbor Island, FL 33154**

City/State and Zip Code

**wpizzorni@gmail.com**

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

For further information concerning this matter, please call:

**William Pizzorni**

Name of Person

at **(305) 861-9086**

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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

Page 1 of 3

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>
MGR	William J. Matalon Pizzorni	1111Kane Concourse Ste. 410	<input checked="" type="checkbox"/> Add
		Bay Harbor Islands, Fl 33154	<input type="checkbox"/> Remove
MGRM	William J. Matalon Pizzorni	1111Kane Concourse Ste. 410	<input type="checkbox"/> Add
		Bay Harbor Islands, Fl 33154	<input checked="" 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.)*

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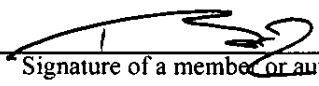
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Dated \_\_\_\_\_, \_\_\_\_\_.



Signature of a member or authorized representative of a member

Typed or printed name of signee

**Page 3 of 3**

**Filing Fee: \$25.00**