

L13000128483

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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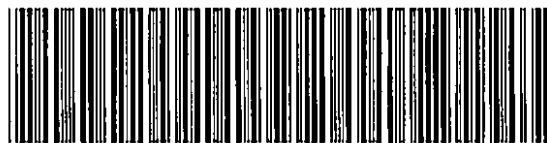
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: HKEEPS PR & PRODUCTIONS, 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:

LUIZ KEEPERMAN

Name of Person

HKEEPS PR & PRODUCTIONS, LLC

Firm/Company

78 SW 7TH STREET

Address

MIAMI, FL 33130

City/State and Zip Code

TIFFANY@ACCOUNTINGTOSCALE.COM

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

For further information concerning this matter, please call:

LUIZ KEEPERMAN

305 733-3944
at ()

Name of Person

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

HKEEPS PR & PRODUCTIONS, LLC

(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 Company were filed on 09/11/2013 and assigned
Florida document number L13000128483.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

78 SW 7TH STREET

MIAMI, FL 33130

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

78 SW 7TH STREET

MIAMI, FL 33130

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

78 SW 7TH STREET

Enter Florida street address

MIAMI

City

Florida 33130

Zip Code

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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MRGM	KEEPERMAN, JUSTIN	1100 BRICKELL BAY DR	<input type="checkbox"/> Add
		27F	<input type="checkbox"/> Remove
		MIAMI, FL 33131	<input checked="" type="checkbox"/> Change
MGR	HOINKIS, LUIZ	350 LINCOLN ROAD	<input type="checkbox"/> Add
		3RD FLOOR	<input checked="" type="checkbox"/> Remove
		MIAMI BEACH, FL 33139	<input type="checkbox"/> Change
MGR	KEEPERMAN, LUIZ	1100 BRICKELL BAY DR	<input checked="" type="checkbox"/> Add
		27F	<input type="checkbox"/> Remove
		MIAMI, FL 33131	<input type="checkbox"/> Change
MGR	PURI, DIWESH	19002 CREST AVE	<input type="checkbox"/> Add
		CASTRO VALLEY, CA 94546	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	LARA LARA, PEDRO GUILLERMO	51 SW 11TH STREET	<input checked="" type="checkbox"/> Add
		APT 834	<input type="checkbox"/> Remove
		MIAMI, FL 33130	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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TALLAHASSEE, FLORIDA

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(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective-time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Luis keeps

Signature of a member or authorized representative of a member

LUIZ KEEPERMAN

Typed or printed name of signee