

L20000219929

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

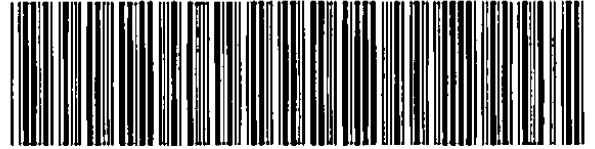
(Business Entity Name)

(Document Number)

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12/17/20
SA

TO: Registration Section
Division of Corporations

SUBJECT: OKEO 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:

LANI LOUSIGNONT

Name of Person

OKEO LLC

Firm/Company

145 SW 54TH TER

Address

CAPE CORAL, FL 33914

City/State and Zip Code

lani7787@yahoo.com

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

For further information concerning this matter, please call:

LANI LOUSIGNONT 702 575-8855
at ()
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

If Changing Registered Agent, Signature of New Registered Agent

or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Act</u>
AMBR	LANI LOUSIGNONT	145 SW 54TH TER	<input type="checkbox"/> Add
		CAPE CORAL, FL 33914	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	UTA MICHELS	132 SW 54TH STREET	<input type="checkbox"/> Add
		CAPE CORAL, FL 33914	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	CRAIG LOUSIGNONT	145 SW 54TH TER	<input type="checkbox"/> Add
		CAPE CORAL, FL 33914	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
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U.S. DISTRICT COURT
SOUTHERN DISTRICT OF FLORIDA
CAPE CORAL, FLORIDA

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Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.

Dated NOVEMBER 6, 2020 11/6/2020

lvz

Signature of a member or authorized representative of a member

LANI LOUSIGNONT

Typed or printed name of signee