



Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : BROWARD SOHO SERVICES INC.
Account Number : I20100000080
Phone : (954)366-3850
Fax Number : (954)633-7850

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

Email Address:

Taxrightpp24@gmail.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
KONU CO PRODUCTIONS LLC

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

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KONUCO 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:

JUAN C IRIARTE

Name of Person

KONUCO PRODUCTIONS LLC

Firm/Company

8457 NW 61 ST

Address

MIAMI, FL 33166

City/State and Zip Code

macarolinacamacho77@gmail.com

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

For further information concerning this matter, please call:

JUAN C IRIARTE

786

325-6857

Name of Person

at (_____) _____

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 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

[illegible]

