

Document Number Only

F 95000004965

CT CORPORATION SYSTEM

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, FL 32301 222-1092

City

State

Zip

Phone

CORPORATION(S) NAME

Don King Productions, Inc.

95 OCT 12 PM 2:23  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

☒ Profit  
☐ NonProfit

☐ Amendment

600001609146

-10/12/95--01062--001

☒ Merge 00 \*\*\*2400.00

☒ Foreign

☐ Dissolution/Withdrawal

☐ Mark

☐ Limited Partnership

☐ Annual Report

☐ Other

☐ Reinstatement

☐ Reservation

☐ Change of R.A.

☐ Fic. Name

☐ Certified Copy

☐ Photo Copies

☐ CUS

☐ Call When Ready

☐ Call if Problem

☐ After 4:30

☒ Walk In

☒ Pick up

☐ Mail Out

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| Name              |
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| Acknowledgment    |
| W.P. Verifier     |

10-12  
3 pm

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-10/16/95--01010--003

\*\*\*\*\*70.00 \*\*\*\*\*70.00

## RESOLUTION OF BOARD OF DIRECTORS

I, the undersigned Don King, do hereby certify  
that this Resolution of the Board of Directors of Don King Productions, Inc.,  
a corporation duly organized and existing under the laws of the State of New York,  
was duly adopted on 10/16, 19 95.

Resolved, that Don King Productions, Inc. organized  
and existing in the State of New York, hereby adopts the  
name DKPI, Inc. for use in Florida.

Dated: 10/11/95

  
Signature of at least one director  
Don King

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

# APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TRANSACTION BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS  
SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACTION BUSINESS IN THE  
STATE OF FLORIDA:

1. Don King Productions, Inc.  
(Name of corporation: must include the word "INCORPORATED", "COMPANY", "CORPORATION" or words or abbreviations of like import in language as will clearly indicate that it is a corporation instead of a natural person or partnership if not so contained in the name at present.)
2. New York  
(State or country under the law of which it is incorporated)
3. 13-2819843  
(FEI number, if applicable)
4. 1975  
(Date of Incorporation)
5. Perpetual  
(Duration: Year corp. will cease to exist or "perpetual")
6. January 1, 1993  
(Date first transacted business in Florida. (See sections 607.1501, 607.1502 and 817.156, F.S.))
7. 871 W. Oakland Park Blvd., Oakland Park, FL 33311  
(Current mailing address)
8. The purpose of the Corporation is to engage in any lawful act or activity for which corporations may be organized under the Florida 1989 Business Corporation Act.  
(Purpose(s) of corporation authorized in home state or country to be carried out in the state of Florida)

9. Name and street address of Florida registered agent:

Name: C T CORPORATION SYSTEM

Office Address: c/o C T Corporation System, 1200 South Pine Island Road

Plantation, Florida, 33324  
(Zip Code)

10. Registered agent acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application. 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.

C T CORPORATION SYSTEM

Cornie Bryan

(Registered agent's signature) (Officer)

CORNIE BRYAN

SPECIAL ASSISTANT SECRETARY

(Type Name and Title of Officer)

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11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and addresses of officers and/or directors:

**A. DIRECTORS**

Chairman: Don King

Address: 16388 Bridlewood Circle

Dolray Beach, FL 33445

Vice Chairman: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

Director: \_\_\_\_\_

Address: \_\_\_\_\_

**B. OFFICERS**

President: Don King

Address: 871 W. Oakland Park Boulevard

Oakland Park, FL 33311

Vice President and Treasurer Jack Meehan

Address: 871 W. Oakland Park Boulevard

Oakland Park, FL 33311

Secretary: Celia Tuckman

Address: 871 W. Oakland Park Boulevard

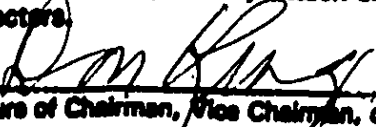
Oakland Park, FL 33311

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TALLAHASSEE, FLORIDA

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Treasurer: Jack Meehan  
Address: 871 W. Oakland Park Boulevard  
Oakland Park, FL 33311

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13.   
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)
14. Don King, President  
(Typed or printed name and capacity of person signing application)

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TALLAHASSEE, FLORIDA

**State of New York : | 'ss:**  
**Department of State**

I hereby certify, that the certificate of incorporation of DON KING PRODUCTIONS, INC. was filed on 10/17/1975, with perpetual duration, and that I have made a diligent examination of the index of corporation papers filed in this Department for a certificate, order, or record of a dissolution, and upon such examination, I find no such certificate, order or record, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

The Statement of Addresses and Directors is past due.

\*\*\*

Witness my hand and the official seal  
of the Department of State at the City  
of Albany, this 06th day of October  
one thousand nine hundred and  
ninety-five.



*Alexander F. Treadwell*

Secretary of State

199510100329

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TALLAHASSEE, FLORIDA

Document Number Only

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C T CORPORATION SYSTEM

Requestor's Name

660 East Jefferson Street

Address

Tallahassee, Florida 32301

City

State

Zip

Phone

CORPORATION(S) NAME

Don King Productions, Inc

d/b/a

OKPI, Inc.

4000002071114--5

-01/28/97--01096--025

\*\*\*\*\*35.00 \*\*\*\*\*35.00

☐ Profit

☐ NonProfit

☐ Limited Liability Company

☐ Foreign

☐ Amendment

☐ Merger

☒ Dissolution/Withdrawal

☐ Mark

☐ Limited Partnership

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W.P. Verifier

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1/17/97

W.H. RDP

DE 1-17

file 24

CR2E031 (1-89)

**APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY  
TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA**

DON KING PRODUCTIONS, INC., D/B/A DKPI, INC.

(Name of Corporation)

New York

(Incorporated Under Laws Of)

This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.

This corporation revokes the authority of its registered agent in Florida to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business or conduct affairs in Florida.

The following is a current mailing address to which the Department of State may mail a copy of any process against this corporation that may be served on the Department.

871 West Oakland Park Boulevard

(Mailing Address)

Oakland Park, Florida 33311

(City - State - Zip)

The corporation agrees to notify the Department of State in the future of any change in its mailing address.

Don King

Signature

1-14-97

Date

Don King

Typed or printed name

President

Title



F9500004965

Section 215.26, Florida Statutes, states in part: "Applications for refunds as provided in this section shall be filed with the Comptroller, except as otherwise provided herein, within 3 years after the right to such refund shall have accrued else such right shall be barred." Three years is generally interpreted as meaning three years from the date of payment into the State treasury. The Comptroller has delegated the authority to accept applications for refund to the unit of State government which initially collected the money.

Pursuant to the provisions of Rule 3A-44.020, Florida Administrative Code, and Section 215.26, Florida Statutes, or Section \_\_\_\_\_, Florida Statutes, I hereby apply for a refund of moneys I paid into the State treasury, which are subject to refund. The following information is submitted to substantiate the claim.

Name: DKPI, INC. EIN or SS#: \_\_\_\_\_

Address: 501 FAIRWAY DR.  
DEERFIELD BEACH, FL 33441

Amount: \$200.00 Date Paid \_\_\_\_\_

Reason for claim: Corp withdraw no AIR required F9500004965  
SP1 5/7/97

Certified true and correct this \_\_\_\_\_ day of \_\_\_\_\_, 19 \_\_\_\_\_.

Signature [Signature]

\* Must be completed if authority is other than Section 215.26, Florida Statutes.

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|---|--|
| Agency recommends approval of above claim and submits the following information to substantiate the claim:      |  |
| Amount of recommended refund \$   | <u>\$200.00</u>                        |
| The amount requested above was originally deposited into the State Treasury as a part of the funds deposited on |  |
| State Treasurer's Receipt No.   | <u>85195/001</u> dated <u>04-22-67</u> |
| Name of Account   | <u>45202130001453000000000010000</u>   |
| Statutory Authority for Collection  | <u>607</u>                             |
| It is requested that payment be made from the following account:  |  |
| NAME OF ACCOUNT   | <u>452021300014530000000022002000</u>  |
| Certified true and correct this _____ day of _____, 19 _____.   |  |
| Department of State, Division of Corporations   | (Agency)                               |
| (Authorized Signature and Title)  |  |