

L21000252514

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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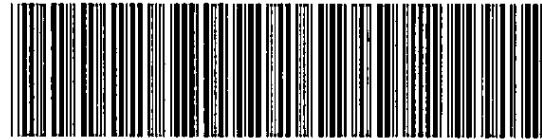
(Business Entity Name)

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STATE OF NEW YORK

A. BUTLER

NOV 16 2021

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: KAPPA PRODUCTS 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:

ALAN H PASTOR

Name of Person

PASTOR & GOLBOIS PA

Firm/Company

1880 N CONGRESS AVE SUITE 214

Address

BOYNTON BEACH FL 33426

City/State and Zip Code

APASTOR@PG-CPA.COM

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

For further information concerning this matter, please call:

ALAN H PASTOR

Name of Person

at (561) 995-1935

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

ED

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ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED

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>
AMBR	DANIELA PAZANSKI	1625 S. FEDERAL HIGHWAY #215	<input checked="" type="checkbox"/> Add
		POMPANO BEACH FL 33062	<input type="checkbox"/> Remove
		3021 3RD ST	<input type="checkbox"/> Change
AMBR	KAYLA REPAN KAPETAN	BOULDER CO 80304	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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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 the document's effective date on the Department of State's records.

Dated OCTOBER 27 2021

Allen H. Pastas
Signature of a member of

Signature of a member or authorized representative of a member

ALAN H PASTOR

Typed or printed name of signee