200019753

Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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Division of Corporations

Fax Number : (850)205-0381

Account Name : FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 : (305)599-0839 Fax Number . : (305)716-0346

FLORIDA PROFIT CORPORATION OR P.A.

KPB PROPERTY MANAGEMENT, INC.

Certificate of Status	0
Certified Copy	1
Page Count	02 3
Estimated Charge	\$78.75

ARTICLES OF INCORORATION

OF

KPB Property Management, Inc.

ARTILCE ONE .

The name of the Corporation is KPB Property Management, Inc.

ARTICLE TWO

The number of shares the corporation is allowed to issue is 1,000 with a 1.00 par value.

ARTICLE THREE

The street address of the initial registered office of the corporation is 4815 E Busch Blvd Suite 113, Tampa, FL 33617.

ARTICLE FOUR

The name and address of the incorporator is: Joseph Janezic 4815 E Busch Blvd Suite 113. Tampa, FL 33617.

ARTICLE FIVE

The mailing address of the initial principle office of the corporation is 917 W Patterson Street Tampa, FL 33604.

ARTICLE SIX

The officer's of the corporation are as follows:

President - Karen Beard

IN WITNESS WHEREOF, the undersign has executed these Articles of Incorporation.

Signature of Incorporator

2-14-62

Date

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REFARY OF STATE AHASSLE, FLORIDA

CERTIFICATE OF DESIGNATION

REGISTERED AGENT / REGISTERED OFFICE

Pursuant to the provision of section 607.0501, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida, submits the following statement in designating the registered office – registered agent, in the State of Florida.

1. The Name of the Corporation is:

KPB Property Management, Inc.

2. The name and address of the registered agent and office is:

Joseph Janezic 4815 E Busch Blvd Suite 113 Tampa, FL 33617

l-laving been named as registered agent and to accept service of process for the above stated corporation at the place designated in this certificate, 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 relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Joseph Janezic

Date

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SECRETARY OF STATE
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