

P08000022465

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

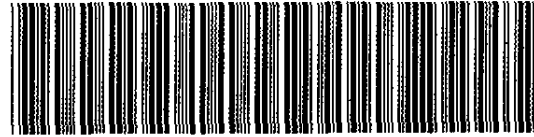
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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10/28/08
(10)

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: KPA PROMOTIONS, P.A. *Tvc*
(Name of Corporation)

DOCUMENT NUMBER: P08000022465

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

PETER TICKTIN, ESQUIRE
(Name of Contact Person)

THE TICKTIN LAW GROUP, P.A.
(Firm/Company)

800 WEST HILLSBORO BOULEVARD, SUITE 220
(Address)

DEERFIELD BEACH, FLORIDA 33063
(City/State and Zip Code)

For further information concerning this matter, please call:

PETER TICKTIN, ESQUIRE at (954) 570-6757
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 10, 2008

PETER TICKTIN, ESQ.
THE TICKTIN LAW GROUP, P.A.
800 WEST HILLSBORO BOULEVARD - SUITE 220
DEERFIELD BEACH, FL 33063

SUBJECT: KPA PROMOTIONS, INC.
Ref. Number: P08000022465

We have received your document for KPA PROMOTIONS, INC. and your check(s) totaling \$315.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent failed to sign the form.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6964.

Irene Albritton
Regulatory Specialist II

Letter Number: 408A00053390

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of FLORIDA in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: KPA PROMOTIONS, INC
2. The principal office address: 8080 BELVEDERE ROAD, UNIT 7, WEST PALM BEACH, FLORIDA 33411
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 03/03/2008 Document number: P08000022465

5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

PETER TICKTIN, ESQUIRE

3700 COCONUT CREEK PARKWAY, SUITE 160

COCONUT CREEK, FLORIDA 33063

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

PETER TICKTIN, ESQUIRE

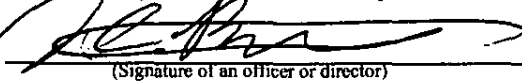
600 WEST HILLSBORO BOULEVARD, SUITE 220

(P.O. Box NOT acceptable)

DEERFIELD BEACH, FLORIDA 33063

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.


(Signature of an officer or director)

WILLIAM BRASMAR, PRESIDENT
(Printed or typed name and title)

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.


(Signature of Registered Agent)

September 8, 2008

(Date)

If signing on behalf of an entity:

(Typed or Printed Name)

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314
CR2E045 (8/05)

FILED STATE
SECRETARY OF CORPORATIONS
08 OCT 28 AM 8:30