

P14000048009

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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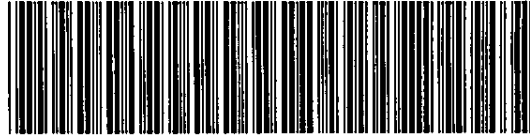
(Business Entity Name)

(Document Number)

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**TRANSMITTAL LETTER**

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DIVISION OF CORPORATIONS  
16 APR -4 AM 9:42

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** 2KA Enterprises, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** P14000048009

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ellen Sines  
(Name of Person)

Diversified Financial Services, Inc.  
(Name of Firm/Company)

10878 S US Hwy #1  
(Address)

Port St. Lucie, FL 34952  
(City/State and Zip Code)

For further information concerning this matter, please call:

Ellen Sines at ( 772 ) 335-0713  
(Name of Person) (Area Code & Daytime Telephone Number)

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

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

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

**OFFICER / DIRECTOR RESIGNATION  
FOR A CORPORATION**

I, Muthita Kampeera, hereby resign as President/Director  
(Title)

of 2KA Enterprises, Inc.  
(Name of Corporation)

P14000048009, a corporation organized under the laws of the State of  
(Document Number, if known)

Florida

X Muthita Kampeera  
(Signature of resigning officer/director)

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
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**FILING FEE IS \$35.00**

**Make checks payable to Florida Department of State and mail to:**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314