

P20 000005673

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

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2020 MAR 11 PM 2:07

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 12, 2020

KAHLIL MCKINNIE  
955 53RD ST, APT 716  
BRADENTON, FL 34208

SUBJECT: KAOTIC PRODUCTIONS ENTERTAINMENT INC  
Ref. Number: P20000005673

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

YOU HAVE NOT COMPLETED THE "REGISTERED AGENT" SECTION CORRECTLY. PLEASE ENTER THE NAME AND STREET ADDRESS OF THE NEW REGISTERED AGENT.

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) 245-6050.

Querida R Moore  
Regulatory Specialist II

Letter Number: 320A00005452

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** KAOTIC PRODUCTIONS ENTERTAINMENT INC  
Name of Corporation

**DOCUMENT NUMBER:** p20000005673

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:

Kahlil mckinnie

Name of Contact Person

KAOTIC PRODUCTIONS ENTERTAINMENT INC

Firm/Company

955 53rds st e apt 716

Address

Bradenton fl 34208

City/State and Zip Code

kaoticproductions25@gmail.com

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

For further information concerning this matter, please call:

Kahlil mckinnie

Name of Contact Person

at (561) 6341633

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

**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: KAOTIC PRODUCTIONS ENTERTAINMENT INC
2. The principal office address: 1601-1 N MAIN ST #3159  
JACKSONVILLE, FL 32206
3. The mailing address (if different): \_\_\_\_\_
4. Date of incorporation/qualification: 01/13/2020 Document number: p20000005673
5. The name and street address of the current registered agent and registered office on file with the  
Florida Department of State: (If resigned, enter resigned)

LEGALCORP SOLUTIONS, LLC

3440 W HOLLYWOOD BLVD. SUITE 415

HOLLYWOOD, FL 33021

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

955 53rd st e apt 716

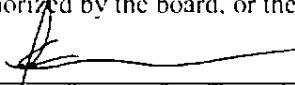
Bradenton fl 34208

P.O. Box NOT acceptable

Kahlil McKinnie

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

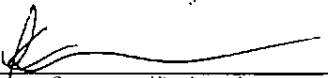
Such change was authorized by resolution duly adopted by its board of directors or by an officer so  
authorized by the board, or the corporation has been notified in writing of the change.

  
Signature of an officer or director

Kahlil McKinnie

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

02/06/2020

Date

If signing on behalf of an entity:

Kahlil McKinnie

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 (04/13)

2020 MAY 11 AM 9:15  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA