

2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000045158

Entity Name: NATURALLY GIFTED EVENTS L.L.C.

Current Principal Place of Business:

4943 SW 163RD AVENUE
MIRAMAR, FL 33027

Current Mailing Address:

4943 SW 163RD AVENUE
MIRAMAR, FL 33027 US

FEI Number: 27-0329815

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SINGH, MIA MESQ
470 SW 169TH TERRACE
WESTON, FL 33326 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title MGR
Name TROTZ, GINA D
Address 4943 SW 163RD AVENUE
City-State-Zip: MIRAMAR FL 33027

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GINA TROTZ

MGR

04/28/2016

_____ Electronic Signature of Signing Authorized Person(s) Detail

_____ Date