#### 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L10000057252

Entity Name: ENT LIVE L.L.C.

FILED
Apr 25, 2018
Secretary of State
CC8182606476

#### **Current Principal Place of Business:**

3690 W GANDY BLVD

#404

TAMPA, FL 33611

## **Current Mailing Address:**

P.O. BOX 360146 TAMPA, FL 33673 US

FEI Number: APPLIED FOR Certificate of Status Desired: No

# Name and Address of Current Registered Agent:

WILLIAMS, MONIQUE L 3690 W GANDY BLVD #404 TAMPA, FL 33611 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:

City-State-Zip:

Electronic Signature of Registered Agent

Date

## Authorized Person(s) Detail:

Title PRESIDENT Title VP

NameTHOMPSON, TOMMYNameWILLIAMS, MONIQUEAddress19755 N.W. 33RD CT.Address3690 W GANDY BLVD

#404

MIAMI GARDENS FL 33056

City-State-Zip: TAMPA FL 33611

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.

VΡ

Electronic Signature of Signing Authorized Person(s) Detail