

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000156037

**Entity Name:** GEM EVENTS LLC

**Current Principal Place of Business:**

5247 NW 95TH AVENUE  
SUNRISE, FL 33351

**Current Mailing Address:**

PO BOX 450447  
SUNRISE, FL 33345 US

**FEI Number:** 46-5560275

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

RAMOS, SUHEIDY  
5247 NW 95TH AVENUE  
SUNRISE, FL 33351 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	Title	MANAGER
Name	RAMOS, SUHEIDY	Name	BERMAN, DULCINEIA C
Address	5247 NW 95TH AVENUE	Address	5247 NW 95TH AVENUE
City-State-Zip:	SUNRISE FL 33351	City-State-Zip:	SUNRISE FL 33351

*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:** SUHEIDY RAMOS

**MANAGER**

**04/30/2015**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date