

2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000008370

Entity Name: EVENTS WITH TENTS, LLC.

Current Principal Place of Business:

4949 SUNBEAM RD
SUITE 5
JACKSONVILLE, FL 32257

Current Mailing Address:

4949 SUNBEAM RD
SUITE 5
JACKSONVILLE, FL 32257 US

FEI Number: 46-1790214

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KELLAM, MICHAEL H
4949 SUNBEAM RD
SUITE 5
JACKSONVILLE, FL 32257 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 KELLAM, MICHAEL H
Address 1151 NATURES HAMMOCK RD S
City-State-Zip: ST JOHNS FL 32259

Title MGRM
Name KELLAM, HEATHER M
Address 1151 NATURES HAMMOCK RD S
City-State-Zip: ST JOHNS FL 32259

Title MGRM
Name BELL, BURKE
Address 4533 SUNBEAM RD #803
City-State-Zip: JACKSONVILLE FL 32257

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: BURKE BELL

PARTNER

02/11/2015

Electronic Signature of Signing Authorized Person(s) Detail

Date