## 2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L14000065693

Entity Name: ALL STAFF EVENTS LLC

**Current Principal Place of Business:** 

1723 WIND HARBOR ROAD BELLE ISLE. FL 32809

**Current Mailing Address:** 

1723 WIND HARBOR ROAD BELLE ISLE, FL 32809 US

FEI Number: 46-5470774 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ALL STAFF EVENTS 1723 WIND HARBOR RD BELLE ISLE, FL 32809 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: ALBERTO FIGUEROA 04/30/2018

Electronic Signature of Registered Agent

Date

FILED Apr 30, 2018

**Secretary of State** 

CC2357734744

## Authorized Person(s) Detail:

Title MANAGER

Name FIGUEROA , ALBERTO C
Address 1723 WIND HARBOR ROAD
City-State-Zip: BELLE ISLE FL 32809

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.

Electronic Signature of Signing Authorized Person(s) Detail

SIGNATURE: ALBERTO FIGUEROA

OWNER

04/30/2018

Date