

**2017 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# M15000006714

**Entity Name:** SFS EVENTS, LLC**Current Principal Place of Business:**347 DON SHULA DR  
MIAMI GARDFENS, FL 33056**Current Mailing Address:**347 DON SHULA DR  
MIAMI GARDFENS, FL 33056**FEI Number:** 47-4855682**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATE CREATIONS NETWORK, INC.  
11380 PROSPERITY FARMS ROAD #221E  
PALM BEACH GARDENS, FL 33410 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	ROSS, STEPHEN M
Address	47 DON SHULA DR
City-State-Zip:	MIAMI GARDFENS FL 33056

Title	CFO, VP
Name	CLEMENTS, CHRISTOPHER B
Address	347 DON SHULA DR
City-State-Zip:	MIAMI GARDFENS FL 33056

Title	VP
Name	BOYAN, TODD
Address	347 DON SHULA DR
City-State-Zip:	MIAMI GARDFENS FL 33056

Title	VP
Name	PISTORIUS, MYLES C
Address	347 DON SHULA DR
City-State-Zip:	MIAMI GARDFENS FL 33056

*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:** MYLES C PISTORIUS

VICE PRESIDENT

01/20/2017

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