

# 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L05000066430

**FILED**  
**Oct 14, 2009**  
**Secretary of State**

**Entity Name:** TAMPA VOLLEYBALL EVENTS, LLC

**Current Principal Place of Business:**

2812 PRICE AVENUE  
TAMPA, FL 33611

**New Principal Place of Business:**

**Current Mailing Address:**

2812 PRICE AVENUE  
TAMPA, FL 33611

**New Mailing Address:**

**FEI Number:** 20-3360557

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DAGOSTINO, LAURI  
2812 PRICE AVENUE  
TAMPA, FL 33611 US

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

DAGOSTINO, LAURI  
2812 PRICE AVENUE  
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: LAURI DAGOSTINO

10/14/2009

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGR ( ) Delete  
Name: DAGOSTINO, LAURI  
Address: 2812 PRICE AVENUE  
City-St-Zip: TAMPA, FL 33611

Title: MGRM ( ) Delete  
Name: DAGOSTINO, RANDY  
Address: 2812 PRICE AVENUE  
City-St-Zip: TAMPA, FL 33611

**ADDITIONS/CHANGES:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: LAURI DAGOSTINO

D

10/14/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date