Page 1 of 1



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H07000008386 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Poing & will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205-0383

From:

. Account Name : HENDRY, STONER, CALANDRINO & BROWN, P.A.

Account Number : I20000000241

: (407)843-5880

Phone

Fax Number

: (407)425-7905

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

SKB EVENT MANAGEMENT, LLC

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0
07
\$25.00

Electronic Filing Menu

Corporate Filing Men

Help

COVER LETTER

TO: Registration Division of	Section Corporations			
SUBJECT: SKB	Event Manageme	ent, LLC		<u> </u>
	(Name	of Limited Liability Co	mpany)	
Dear Sir or Madam:				
The enclosed Article	s of Correction and fee(s)		,, ,	
Please return all corr	cspondence concerning thi	s matter to the following		
G. Steven B	rown		_,	
	(Name of Person)	10000	* * * *	
Hendry, Stone	r, Calandrino & Bro	wn, P.A.	 -	e Production State of
	(Pittie Company)			
20 North Orang	ge Avenue Suite 60	0	_	The Mills of the State of the S
	(Address)			ALI
Orlando, Florid	la 32801			CRE
<u> </u>	(City/State and Zip Code)		_	TAR NAS
For further informati	on concerning this matter,	please call:		eranza
		407	0.40 5000	
G. Steven Brow	arno of Person)	at (407 (Area Code	843-5880 & Daytime Telephone Number)	9: 59 STATE LORIDE
STREET/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, Florida	cions er Circle		MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	1-
Enclosed is a check	for the following amount	•		
S25 Piling Fcc	☐ \$30 Filing Fee & Certificate of Status	S55 Filing Fee & Certified Copy	Secondary Fee, Certificate of Status & Certified Copy	

CR2E062 (08/05)

ARTICLES OF CORRECTION FOR FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

Pursuant to section 608.4115, F.S., this document is being submitted within the required 30 business days to correct the attached articles of organization or application to transact business in Florida.

FIRST	The name of the limited liability company is: SKB Event Management, LLC	···· <u>·</u>				
SECO	ND: The articles of organization or the application to transact business					
(CH	ECK THE APPROPRIATE BOX AND COMPLETE THE APPLICABLE STAT	EMENT				
	Contains an incorrect statement. The incorrect statement, the reason the statement is incorrect, and the corrected statement are as follows: Article IV - Management Incorrectly states that Susan K. Barnes is the sole Member. The					
	name of the correct member is Susan K. Brooks.					
	The corrected statement is: The Company is it be managed by the Member, and the sole	Member Is				
	Susan K. Brooks, 22 Pamview Court, Apt. 306, Winter Springs, Florida 32708.	F 5 0				
	<u>OR</u>	LLAH/				
	Was defectively signed. The manner in which the document was defectively state appropriate correction are as follows:	ignégation 7				
		C : S				
		<u> </u>				
Dated;	January 10 , 2007					
	Istem Brown					
	Signature of a member or authorized representative of a member					
	G. Steven Brown					
	Typed or printed name of signee					
	Filing Fee: \$25.00 Certified Copy: \$30.00 (optional)					

CR2E062 (08/05)

H07000005573 3

ARTICLES OF ORGANIZATION

OF

SKB EVENT MANAGEMENT, LLC

The undersigned, being authorized to execute and file these Articles of Organization, hereby certifies that:

ARTICLE I - Name:

The name of the limited liability company (hereinafter referred to as the "Company") is "SKB EVENT MANAGEMENT, LLC."

ARTICLE II — Address: 40 mg/s of the control of the

The mailing address and street address of the principal office of the Company is 22 Pamvisw Court, Apt. 306, Winter Springs, Florida 32708.

ARTICLE III — Registered Agent:

The name and the Florida street address of the initial registered agent are: Hendryc Storer, Calandrino & Brown, P.A. at 20 N. Orange Avenue, Suite 600, Orlando, Florida 32801

ARTICLE IV - Management:

The Company is to be managed by the Member, and the sole Member is Susan K. Barnes, 22 Pamview Court, Apt. 306, Winter Springs, Florida 32708.

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this 8th day of January, 2007.

G. Steven Brown, Authorized Representative of the Member H07000005573 3

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 608.415 or 608.507, Florida Statutes, the undersigned Limited Liability Company submits the following statement in designating the registered office/registered agent, in the State of Florida:

- (1) The name of the limited liability company is SKB EVENT MANAGEMENT, LLC.
- (2) The name and address of the registered agent and office is Hendry, Stoner, Calandrino & Brown, P.A., 20 North Orange Avenue, Suite 600, Orlando, Florida 32801.

Having been named as registered agent and to accept service of process for the above-named limited liability company at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes, relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Dated: January 8, 2007

Hendry, Stoner, Calandrino & Brown, P.A. By:

C. Steven Brown

O7 JAN 10 AH 9:59
SECRETARY OF STATE
AND AHASSEF FLORIDA