

2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L07000094377

FILED
Oct 17, 2008
Secretary of State

Entity Name: T-4 EVENTSLLC

Current Principal Place of Business:

5515 NW 54 CIRCLE
COCONUT CREEK, FL 33073 US

New Principal Place of Business:

Current Mailing Address:

5515 NW 54 CIRCLE
COCONUT CREEK,

New Mailing Address:

5515 NW 54 CIRCLE
COCONUT CREEK, FL 33073 US

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

BENDER, LAURA K
5515 NW 54 CIRCLE
COCONUT CREEK, FL 33073 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: LAURA BENDER

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: OSORIO, DEBRA
Address: 90 GANNET DR.
City-St-Zip: COMACK LI, NY 11725 US

Title: MGRM () Delete
Name: BENDER, LAURA
Address: 5515 NW 54 CIR
City-St-Zip: COCONUT CREEK, FL 33073 US

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: LAURA BENDER

MGRM

10/17/2008

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