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SECRETARY OF STATE

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: LL Events, LLC (Name of L	imited Liability Company)	
Dear Sir or Madam:		
The enclosed Registered Agent/Registered O	ffice Change and fee(s) are submitted for filing.	
Please return all correspondence concerning	this matter to the following:	
Joshua S. Pinsky, Esq. (Name of Person)	 	
Stein, Rosenberg & Stein, P.A. (Firm/Company)	· · · · · · · · · · · · · · · · · · ·	
1499 W. Palmetto Park Road, Suite 300)	
(Address)		
Boca Raton, FL 33486		
(City/State and Zip Code)		
For further information concerning this matte	er, please call:	
Joshua S. Pinsky	at (561) 368-0888	
(Name of Person)	(Area Code & Daytime Telephone Number)	
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
Enclosed is a check for the followin	g amount:	
\$25 Filing Fee	\$55 Filing Fee & Certified Copy	

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

age.ii, or com, in the star	Table State of the	the second secon	
1. The name of the limited	d liability company is	LL Events, LLC	
2. The mailing address o	f the limited liability of	company is : 1355 W. Palmetto Park Roa	d, #171
Boca Raton, FL 33486		· · ·	
Dood (1410), 1 2 00-100			
October 17, 2007 L0700010547		L07000105471	
3. Date of filing/registrat	ion in Florida	4. Document number	
5. The name of the register Florida Department of	ered agent and the regi	istered office address as shown on the re	ecords of the
	Stein, Rosenberg	& Stein, P.A.	
		Name	
	1400 W. Palmetto P	ark Road, Suite 300	2
		Address	SE VIS
	Boca Raton, FL 334		9 55
	City	, State and Zip	7 55
6. The name and address	_	_	SECRETARY VISION OF C 07 OCT 22
and the second second	Stein, Rosenberg &	Stein, P.A	
. , , , , , , , , , , , , , , , , , , ,	440044.5	Name	· · · · · · · · · · · · · · · · · · ·
	1499 W. Palmetto Pa	ark Road, Suite 300	
,	Florida street addre	ss (P.O. Box NOT acceptable)	
in the XIII see that the	Boca Raton,	FL '33486	<u>.</u>
	City,	State and Zip	_
confirmed that after the c	hange or changes are in the registered agent wereby confirmed that the pited liability companion of the limited liability.	d under the laws of the State of Florida, made, the Florida street address of the rwill be identical. Or, in the case of a Florida change(s) was/were authorized by an y or as otherwise provided in the article (ty company.	egistered office
11001	~ /	0 / 1 0	
(Printed or typed name of signee			
I hereby accept the appo comply with the provision and I am familiar with an Chapter 608, F.S. Or if address, I hereby confirm	intment as registered is of all statutes relatived accept the obligation this document is being that the limited liabil	agent and agree to act in this capacity ve to the proper and complete performance of my position as registered agent as filed to merely reflect a change in the lity company has been notified in writin	I further agree to ince of my duties, provided for in registered office g of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 FILING FEE; \$25.00