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EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
	ncept Events, LLC imited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Or	ffice Change and fee(s) are submitted for filing.
Please return all correspondence concerning t	this matter to the following:
Angela Nelson	
Name of Person	
Koncept Events, LLC Firm/Company	
3400 NE 12th Avenue Address	En la serie de la
Oakland Park, FL 33334 City/State and Zip Code	ディング の の で で で で で で で で で で で で で で で で で
angie@konceptevents.com E-mail address: (to be used for future annual report no	otification)
For further information concerning this matte	er, please call:
Angie Nelson Name of Person	at (954) 390-0898 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 following	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.

1. Name of the limited liability company:	Koncept Events, LLC	
2. (a) Principal office address of limited liability company	: 3400 NE 12tl	h Avenue
(Note: MUST BE STREET ADDRESS)	Oakland Park, FL 33334	
(b) Mailing address of limited liability company:	3400 NE 12th Aver	lue
(Note: MAY BE POST OFFICE BOX)	Oakland Park, FL 33334	
November 2007	L0700011307	4
3. Date of filing/registration in Florida	4. Document number	
5. (a) Registered Agent and Registered Office shown on t	_	t. of State:
Registered Agent:	Hillary L Hefner	> c
Registered Office Address:	2900 N Dixie Highway 201	fő Ē
Action of the state of the stat	Oakland Park, FL 33334	
(b) Enter name of NEW Registered Agent and/or NEW	V Registered Office address	
NEW Registered Agent:	Hillary L Smith	
MEW Registered Agent.	Timary L Office	
NEW Registered Office Address:	3400 NE 12th Avenue	
(MUST BE FLORIDA STREET ADDRESS)		DI 00004
	Oakland Park	_,FL <u>33334</u>
If the limited liability company is not organized under the liconfirmed that after the change or changes are made, the Fl and the business office of the registered agent will be identiliability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company	ical. Or, in the case of a Flori- was/were authorized by an at	da limited ffirmative vote
Printed or typed name of signee I hereby accept the appointment as registered agent and accomply with the provisions of all statutes relative to the pro-	- gree to act in this capacity. I oper and complete performan	further agree to ce of my duties.
I hereby accept the appointment as registered agent and a comply with the provisions of all statutes relative to the providing and I am familiar with and accept the obligations of my post Chapter 608, F.S. Or, if this document is being filed to me address, I hereby confirm that the limited liability company Signature of Registered Agent	sition as registered agent as p rely reflect a change in the re has been notified in writing o	rovided for in zistered office of this chänge.