## 2009 LIMITED LIABILITY COMPANY REINSTATEMENT

## DOCUMENT# L08000111815

MGR

Entity Name: OFFSHORE EVENTS LLC

**FILED** Oct 16, 2009 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

6905 WEST BROWARD BLVD STE 109 6955 WEST BROWARD BLVD PLANTATION, FL 33317

PLANTATION, FL 33317

**Current Mailing Address: New Mailing Address:** 

6955 WEST BROWARD BLVD 6905 WEST BROWARD BLVD STE 109

PLANTATION, FL 33317 PLANTATION, FL 33317

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

SCHOENWALD, BRAD A SCHOENWALD, BRAD

6905 WEST BROWARD BLVD STE 109 6955 WEST BRÓWARD BLVD PLANTATION, FL 33317 PLANTATION, FL 33317

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: BRAD SCHOENWALD 10/16/2009

> Electronic Signature of Registered Agent Date

## MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

MGR Title: (X) Change ( ) Addition () Delete

SCHOENWALD, BRAD A SCHOENWALD, BRAD A Name: Name:

Address: 6955 WEST BROWARD BLVD Address: 6905 WEST BROWARD BLVD STE 109 PLANTATION, FL 33317 PLANTATION, FL 33317

City-St-Zip: City-St-Zip:

Title: () Delete Title: () Change () Addition Name: GOLDMAN, LARRY Name:

Address: 12050 NE 14TH AVE Address: City-St-Zip: NORTH MIAMI, FL 33161 City-St-Zip:

Title: () Delete Title: MGR ( ) Change (X) Addition

Name: STEIGER, ALON Name:

169 EAST FLAGLER STE 918 Address: Address:

City-St-Zip: City-St-Zip: MIAMI, FL 33131

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: BRAD SCHOENWALD **MGRM** 10/16/2009