

LO9000058880

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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TALLAHASSEE, FLORIDA

D SCOTT

JUL 11 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

June 22, 2017

DOWNY BELIDOR
1507 HOBBS ST
TAMPA, FL 33619

SUBJECT: CLASSIC EVENTS ENTERTAINMENT, LLC
Ref. Number: L09000058880

RECEIVED
2017 JUL -5 AM 9:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for CLASSIC EVENTS ENTERTAINMENT, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please complete section 5(b) of application.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Pijaux
Regulatory Specialist

Letter Number: 717A00012708

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CLASSIC EVENTS ENTERTAINMENT
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Registered Agent/Registered Office Change and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Downy BELDOR

Name of Person

CLASSIC EVENTS ENTERTAINMENT

Firm/Company

1507 HOBBS ST TAMPA

Address

TAMPA FL 33619

City/State and Zip Code

CEEGODJ@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Downy BELDOR

Name of Person

at (813) 444 4039

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 amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

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TALLAHASSEE, FLORIDA

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

Pursuant to the provisions of sections 605.0114 or 605.0116, 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: CLASSIC EVENTS ENTERTAINMENT
2. (a) 1507 HOBBS ST TAMPA 33619 (b) 1507 HOBBS ST TAMPA FL 33619

Principal office address of limited liability company:

(Note: **MUST BE STREET ADDRESS**)

Mailing address of limited liability company:

(Note: **MAY BE POST OFFICE BOX**)

1507 HOBBS ST TAMPA FL 33619

1507 HOBBS ST TAMPA FL 33619

3. 06/17/2009 Date of filing/registration in Florida
4. LO9000654480 Document number

5. (a) BELIDOR, Downy
Registered Agent and Registered Office shown on the records of the Florida Dept. of State:

Registered Office Address (**MUST BE FLORIDA STREET ADDRESS**)

30235 USF HOLLY DR

TAMPA, FL 33620

- (b) BELIDOR, Downy
Enter name of **NEW Registered Agent** and/or **NEW Registered Office address**:

30235 USF HOLLY DR

NEW Registered Office Address:

TAMPA FL 33620

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Downy
Signature of a member or authorized representative of a member

Downy BELIDOR
Printed or typed name of signer

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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Downy
Signature of Registered Agent

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