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DIVISION OF CORPORATIONS  
10 APR 26 AM 11:57

T. HAMPTON

APR 27 2010

EXAMINER

88891-047

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Special Event Management, LLC  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Alejandro Gonzalez  
Name of Person

Alejandro Gonzalez  
Firm/Company

3701 NW 110 AV. Apt. South  
Address

coral springs FL. 33065  
City/State and Zip Code

AGON24LE2300@email.SUAGM.EDU  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alejandro Gonzalez at (954) 304-5993  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |   |   |   |
|--|---|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|--|---|---|---|

**Mailing Address**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street/Courier Address**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

10 APR 26 PM 4:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

April 6, 2010

ALEJANDRO GONZALEZ  
3701 NW 110 AVE  
APT S  
CORAL SPRINGS, FL 33065

SUBJECT: SPECIAL EVENT MANAGEMENT, LLC  
Ref. Number: W10000016889

We have received your document for SPECIAL EVENT MANAGEMENT, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We regret that we were unable to contact you by phone. Please return the corrected document with a letter providing us with a telephone number where you can be reached during working hours.

The Florida Statutes require an entity to designate a street address for its principal office address. A post office box is not acceptable for the principal office address. The entity may, however, designate a separate mailing address. The mailing address may be a post office box.

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 410A00008440

FAX AUDIT # \_\_\_\_\_

**ARTICLES OF ORGANIZATION  
OF  
SPECIAL EVENT MANAGEMENT, LLC**

**ARTICLE I            NAME**

The name of the limited liability company shall be: **SPECIAL EVENT MANAGEMENT, LLC**

**ARTICLE II            PRINCIPAL OFFICE**

3701 NW 110 Th AV Apt. South, Coral Springs, Florida 33065

**ARTICLE III            INITIAL REGISTERED AGENT & STREET ADDRESS**

The name and address of the initial registered agent is: ALEJANDRO GONZALEZ, 3701 NW 110 th AV Apt. South, Coral Springs, Florida 33065. Located in the County of Broward.

**ARTICLE IV            DURATION**


The duration for the limited liability company shall be: 12/31/2050.

**ARTICLE V            MANAGERS/MEMBERS**

The management of the limited liability company is reserved for the Members and the names and addresses of the members of the Limited Liability Company are:

ALEJANDRO GONZALEZ, 3701 NW 110 th AV Apt. South, Coral Springs, Florida 33065

MILAGROS VASQUEZ, 3701 NW 110 th AV Apt. South, Coral Springs, Florida 33065

  
\_\_\_\_\_  
Organizer

CERTIFICATE OF DESIGNATION OF REGISTERED  
AGENT/REGISTERED OFFICE

FAX AUDIT # \_\_\_\_\_

10 APR 26 AM 11:37  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

FAX AUDIT # \_\_\_\_\_

CERTIFICATE OF DESIGNATION OF REGISTERED  
AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES,  
THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE  
STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN  
DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE  
STATE OF FLORIDA.

The name of the limited liability company is: **SPECIAL EVENT MANAGEMENT,  
LLC**

The name and address of the registered agent and office is **ALEJANDRO GONZALEZ,**  
3701 NW 110 th AV Apt. South, Coral Springs, Florida 33065. Located in the County  
of Broward.

Having been named as registered agent and to accept service of process for the above  
stated company at the place designated in this certificate, 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 relating to the proper and complete performance of my duties,  
and I am familiar with and accept the obligations of my position as registered agent.

Signature: \_\_\_\_\_

*Alejandro Gonzalez*  
ALEJANDRO GONZALEZ

Date: 03/30/2010

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
10 APR 26 AM 11:37

FAX AUDIT # \_\_\_\_\_