

L16000170935

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

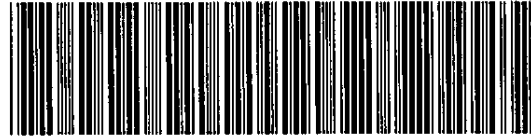
(Business Entity Name)

(Document Number)

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11/16/17--01005--020 **25.00

2018 FEB 25 PM 1:57
J. HARRIS

FEB 26 2018
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Southern Arts Events
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:

Kimberly Sumere1
Name of Person

Southern Arts Events
Firm/Company

4300 W. Lake Mary Blvd #216
Address

Lake Mary FL 32746
City/State and Zip Code

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

For further information concerning this matter, please call:

Kimberly Sumere1 at (844) 370-1918
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 following amount:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 9, 2018

KIMBERLY SUMEREL
4300 W LAKE MARY BLVD #216
LAKE MARY, FL 32746

SUBJECT: SOUTHERN ARTS EVENTS, LLC
Ref. Number: L16000170935

We have received your document for SOUTHERN ARTS EVENTS, 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):

You failed to make the correction(s) requested in our previous letter.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Jenna D Harris
Regulatory Specialist II

Letter Number: 018A00000578

RECEIVED
FEB 26 2018

2018 FEB 26 PM 1:55



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 17, 2017

KIMBERLY SUMEREL
4300 W LAKE MARY BLVD #216
LAKE MARY, FL 32746

SUBJECT: SOUTHERN ARTS EVENTS, LLC
Ref. Number: L16000170935

We have received your document for SOUTHERN ARTS EVENTS, 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):

The registered agent must sign accepting the designation.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

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.

Jenna D Harris
Regulatory Specialist II

Letter Number: 717A00023394

RECEIVED
JAN - 8 2018

**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: Southern Arts Events

2. (a) _____ (b) _____
Principal office address of limited liability company: Mailing address of limited liability company:
(Note: **MUST BE STREET ADDRESS**) (Note: **MAY BE POST OFFICE BOX**)

4300 W. Lake Mary Blvd
Lake Mary FL 32716

4300 W. Lake Mary Blvd
Lake Mary FL 32716

3. 09/13/2016
Date of filing/registration in Florida

4. L16000170935
Document number

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

Registered Office Address (MUST BE FLORIDA STREET ADDRESS)

Legal Tnc Corporate Services
5237 Summerlin, FL Ft. Meyers 33907

(b) _____
Enter name of NEW Registered Agent and/or NEW Registered Office address:

4300 W. Lake Mary Blvd
NEW Registered Office Address:

Lake Mary, FL 32716

2018 FEB 26 PM 1:30
FILED
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF
HIGHLAND FLORIDA

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.

Kimberly Summerlin
Signature of a member or authorized representative of a member

Kimberly Summerlin
Printed or typed name of signee

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.

[Signature]
Signature of Registered Agent