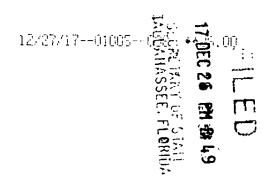
L16000188450

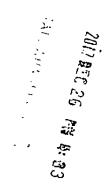
(Req	uestor's Name)	
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bbA)	ress)	
(City	/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
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(Doc	ument Number)	
Certified Copies	Certificate	s of Status
Special Instructions to Filing Officer:		

Office Use Only



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DEC 2.7 2017
Y SULKER

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.

ame of the limited liability company: $\underline{\qquad \qquad 5e}$	Misul Mo	EVENTS, LLC
12	(b)	
		Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
13800 BRINGEWATER CROSSINGS	BWO €307	13800 BRIDGE WATER CROSSING BU
WINDERMERC FL 34756		WINDERMAR FL 34786
10-11-2016		L16000188450
Date of filing/registration in Florida	4.	Document number
Registered Agent and Registered Office shown on the reco	ords of the Florida Dep	t. of State:
	•	
1702 W CLEVELAND SI 120	S	
TAMAT	_, FL <u>3360(</u>	2 17 17 17 17 17 17 17 17 17 17 17 17 17
Enter name of NEW Registered Agent and/or NEW Regi	istered Office address	A SEE THE SEE
NEW Registered Office Address:	····	The second secon
13800 BRIDGEWATER CROSSIN	45 BLVO E	307
M:NDEXMELE	_, FL3478	<u>6</u>
ange or changes are made, the Florida street addressible be identical. Or, in the case of a Florida limitere authorized by an affirmative vote of the member of a member of a member or authorized representative of a member or accept the appointment as registered agent and	ess of the registere ted liability compa bers of the limited of the limited liabil	rd office and the business office of the registered any, it is hereby confirmed that the change(s) liability company or as otherwise provided in lity company. Stort Ducad Printed or typed name of signee this canacity. I further garee to comply with the
	Principal office address of limited liability company (Note: MUST BE STREET ADDRESS) 13800 BRIDGE WATER CROSSINGS WINDER MERC PL 34786 10-11-2016 Date of filing/registration in Florida DUNCAN SCOTT Registered Agent and Registered Office shown on the recommendation of MEW Registered Agent and/or NEW Registered Office Address 1702 W CLEVELAND ST 125 TAMPA NEW Registered Office Address: 13800 BRIDGE WATER CROSSING WINDER MERE Limited liability company is not organized under to ange or changes are made, the Florida street addressing of my non-company is not organized under the company of the proper and comment of a thember or authorized by an affirmative vote of the memicales of organization or the operating agreement of the proper and comment of all statutes relative to the proper and comment of all statutes relative to the proper and comment of all statutes relative to the proper and comment of all statutes relative to the proper and comment of all statutes relative to the proper and comment of all statutes relative to the proper and comment of the proper and c	Principal office address of limited liability company: (Note: MUST BE STREET ADDRESS) 13800 BRIDGEWATER CROSSINGS BLOD 5007 WINDER MERC PL 34786 10 - 11 - 2016 Date of filing/registration in Florida 4. DUNGAN SCOTI Registered Agent and Registered Office shown on the records of the Florida Dep Registered Office Address (MUST BE FLORIDA STREET ADDRESS) 1707 W CLEVELAND ST 525 TAMPA 5001 Enter name of NEW Registered Agent and/or NEW Registered Office address NEW Registered Office Address: 13800 BRIDGEWATER CROSSINGS BLVD 6 WINDELMELE FL 3478 Ilimited liability company is not organized under the laws of the State ange or changes are made, the Florida street address of the registere will be identical. Or, in the case of a Florida limited liability comparer authorized by an affirmative vote of the members of the limited lies of forganization or the operating agreement of the limited liability company and the registered agent and agree to act in the limit of all statutes relative to the proper and complete performance ligations of my position as registered agent and agree to act in the limit of all statutes relative to the proper and complete performance ligations of my position as registered agent as provided for in Chagely reflect a change in the registered agent as provided for in Chagely reflect a change in the registered agent as provided for in Chagely reflect a change in the registered agent as provided for in Chagely reflect a change in the registered agent as provided for in Chagely reflect a change in the registered agent as provided for in Chagely reflect a change in the registered agent as provided for in Chagely reflect a change in the registered agent as provided for in Chagely reflect a change in the registered agent as provided for in Chagely reflect a change in the registered agent as provided for in Chagely reflect a change in the registered agent as provided for in Chagely reflect a change in the registered agent as provided for in Chagely and the registered agent as provided for in C

COVER LETTER

TO: Registration Section Division of Corporations	
Division of Corporations	
SUBJECT: Scint DUNCAN	C
SUBJECT: WITH DUNCAN	LYENTS LLC
Name	of Limited Liability Company
Dear Sir or Madam:	
The enclosed Registered Agent/Registered Offic	e Change and fee(s) are submitted for filing.
Please return all correspondence concerning this	matter to the following:
	-
Crom Doners	
Scott Duneau Name of Person	
SOUT NOW EVEL	a LLC
SOOTI DUNCAN EVENT	
r irm/Company	
120.2	. o e
13800 BRIDGEWATER CRO	<u> 307</u>
Address	
WINDERMERE FLORIDA	34766
City/State and Zip Code	-
0.0), 0.0.0 a.d. a.p. 0.020	
SCOTT QRNOEVENTS. COM	
E-mail address: (to be used for future annual	al report notification)
,	•
For further information concerning this matter, p	lease call:
Scott DUNCAN	at (772) 777 - 9738
Name of Person	Area Code & Daytime Telephone Number
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations Division of Corporations	
Clifton Building P.O. Box 6327	
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	
Enclosed is a check for the following a	mount:
12 \$25 Filing Fee	☐ \$55 Filing Fee & Certified Copy

INHS18 (2/14)