

L19000300372

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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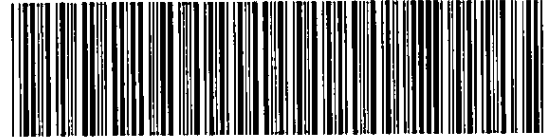
(Business Entity Name)

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V. SULKER

FEB 27 2020

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Curated Events Miami, LLC
Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

Rachel Perez
Name of Person

Curated Events Miami, LLC.
Firm/Company

14955 SW 49 Lane, #E
Address

Miami, FL 33185
City/State and Zip Code

rachel@curatedeventsmiami.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rachel Perez at (786) 468-9983
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Curated Events Miami, LLC

If Changing Registered Agent, Signature of New Registered Agent

[illegible]

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated January 27th, 2020

Rachel Perez

Typed or printed name of signee