

L20 000 138333

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

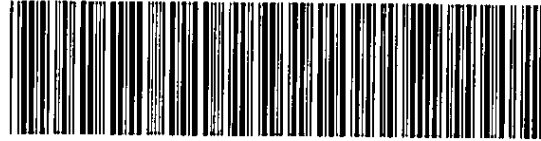
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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2020 JUN 29 AM 6:49

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AUG 11 2020

S. YOUNG

KAPOW

June 25, 2020

Florida Dept of State
Division of Corporation – Certification Section
2415 N Monroe Street, Suite 810
Tallahassee, FL 32302

RE: Kapow! Events Management, LLC
Document No: L20000138333

Dear Sir/Madam:

Enclosed is a check in the amount of \$60.00 for the Filing Fee, Certificate of Status and Certified Copy of the Articles of Amendment to Articles of Organization for the above referenced company. Please return the certified copy to my attention in the enclosed self-addressed FedEx envelope.

Please free to contact my assistant, Nancy Aviles with any questions at 407-674-2944 or via e-mail at naviles@hello-dmc.com.

Thank you,

Timothy L. Baker

Timothy L. Baker
Manager

TLB/nea
Enclosures

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Enterprise Events Management, 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:

Nancy Aviles

Name of Person

Kapow! Events Management, LLC

Firm/Company

3840 Vineland Road, Suite 200

Address

Orlando, FL 32811

City/State and Zip Code

naviles@hello-dmc.com

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

For further information concerning this matter, please call:

Nancy Aviles

407 674-2944

at ()

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

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager
AMBR = Authorized Member

[illegible]

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Timothy L. Baker

Timothy L. Baker

Filing Fee: \$25.00