APPROVE 2002 UNIFORM BUSINESS REPORT (UBR) AND. DOCUMENT # M0000002430 1. Entity Name 02 FEB 11 PM 1:57 ALL THAT MUSIC AND MORE FESTIVAL, LLC SECRETARY OF STATE TALLAHASSEE, FLORIDA Mailing Address Principal Place of Business 2000 WEST LOOP SOUTH, STE, 1300 2000 WEST LOOP SOUTH, STE. 1300 HOUSTON TX 77027 HOUSTON TX 77027 2. Principal Place of Business 3. Mailing Address 220 West 42nd Street 220 West 42nd Street DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 4. FEI Number Applied For City & State 13-4104202 Not Applicable New York, New York New York, New York \$5.00 Additional Country Zip Zip 5. Certificate of Status Desired Fee Required 10036 10036 USA USA 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name Corporation Service Company CT Corporation System Street Address (P.O. Box Number is Not Acceptable) 1200 South Pine Island Road Plantation, FL 33324 City B2301-2525 Tallahassee 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Christine J. Gates, Asst. V.P. 02/06/2002 SIGNATURE (NOTE: Registered Agent signature required when reinstating) DATE agent and title if applicable FILE NOW!!! FEE IS \$50.00 Make Check Payable to Department of State Due By May 1, 2002 ADDITIONS/CHANGES MANAGING MEMBERS/MANAGERS 10. 9. ☐ Addition Change TITLE MEM ☐ Delete TITLE NAME SFX FAMILY HOLDINGS, INC. NAME STREET ADDRESS STREET ADDRESS 220 WEST 42ND STREET CITY-ST-ZIP CITY-ST-7IP NEW YORK NY 10036 TITLE Change ☐ Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

CITY-ST-ZIP 11. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate any that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receive or yestee empowered to execute this report as required by Chapter 608, Florida Statutes.

TITLE

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

☐ Delete

☐ Delete

☐ Delete

Delete

URERICHARDARIESE, EVP & Secy of Sole Member

TITLE

NAME

TITI F

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-7IP

CITY-ST-ZIP

CITY-ST-ZIP

000004899<mark>0</mark>

☐ Change

☐ Change

☐ Change

☐ Addition

Addition

☐ Addition





ACCOUNT NO. :

072100000032

REFERENCE :

AUTHORIZATION

COST LIMIT :

ORDER DATE: January 25, 2002

ORDER TIME : 11:08 AM

ORDER NO. : 097126-185

CUSTOMER NO: 4375356

CUSTOMER: Ms. Christina V. Lynge

Sfx Entertainment, Inc. 220 West 42nd Street

New York, NY 10036

CHANGE OF AGENT

NAME:

ALL THAT MUSIC AND MORE

FESTIVAL, LLC

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY XX PLAIN STAMPED COPY

CONTACT PERSON: Angie Glisar