## M1400003169

(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



09/16/14--01010--023 \*\*25.00





CSC - WILMINGTON
Suite 400
2711 Centerville Road
Wilmington De 19808
800-927-9800
302-636-5454 FAX

To: REGISTRATION SECTION DIVISION OF CORPORATIONS

From: Grace Kirby gkirby3@cscinfo.com

Date: September 12, 2014

Order#: 288363-016

Re: EVENT LINKS INTERNATIONAL, LLC

Enclosed please find:

XX Change of Registered Agent and Office.

XX Check in the amount of \$25.

Please take the following action:

XX File in your office on a routine basis.

XX Issue Proof of Filing.

XX Please return evidence to the following:

Attn: Grace Kirby

c/o Corporation Service Company 2711 Centerville Road, Suite 400

Wilmington, DE 19808

XX Return envelope is also enclosed for your convenience.

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

QUCA.XCOA

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR

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.	Na	me of the limited liability company: EVENT LINKS IN	NTERN	ATIONAL, LI	LC
2.	(a)	631 US Highway One	(b) 631 US Highway One		
	( <del>u</del> ) .	Principal office address of limited liability company:  (Note: MUST BE STREET ADDRESS)			Mailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
		Suite 410		Suite 410	
		North Palm Beach, FL 33408	North Palm Beach, FL 33408		
		05/06/2014		M1400000	03169
3.		Date of filing/registration in Florida	4.		Document number
5.	(a)	C T Corporation System			
	` '	Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  1200 South Pine Island Road			
	Registered Office Address (MUST BE FLORIDA STREET ADDRESS)				
		Plantation , FL	33324	1	
	(b)	,			
		Enter name of <u>NEW Registered Agent</u> and/or <u>NEW Registered (</u>	Office ad	<u>dress</u> :	THE SEP 16
		4204 Have Charact			We will be a second
		1201 Hays Street  NEW Registered Office Address:			
					12년 <b>대</b> 12년 <b>대</b>
		•			ن الله الله الله الله الله الله الله الل
		Tallahassee, FL_	32301	<u></u> .	•
the age	cha ent v s/we	imited liability company is not organized under the lawinge or changes are made, the Florida street address of will be identical. Or, in the case of a Florida limited liable authorized by an affirmative vote of the members of cles of organization of the operating agreement of the l	the regi bility co f the lin	stered office ompany, it is nited liability	and the business office of the registered shereby confirmed that the change(s) y company or as otherwise provided in
		()	Dor	na Priebe, A	uthorized Person
5	Signa	ture of a member or authorized representative of a member			Printed or typed name of signee
pro the	ovisi : obl mere	by accept the appointment as registered agent and agre ons of all statutes relative to the proper and complete p igations of my position as registered agent as provided ely reflect a change in the registered office address, I h d'in writing of this change	ee to ac perform I for in t eereby c	t in this cape ance of my o Chapter 605 onfirm that	acity. I further agree to comply with the duties, and I am familiar with and accept . F.S. Or, if this document is being filed the limited liability company has been
<u> </u>		re of Registered Agent Corporation Service Company	RV· C	race F Kir	by, Assistant VP

Division of Corporations • P.O. Box 6327 • Tallahassee, FL 32314 FILING FEE: \$25.00