M17000001535

(Requestor's Name)					
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(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
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Special Instructions to Filing Officer:					
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Office Use Only



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August 22, 2017

MATTHEW JACKSON PO BOX 1412 FRANKLIN, TN 37065

SUBJECT: EVENT ONE FX, LLC Ref. Number: W17000068915

We have received your document for EVENT ONE FX, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 607.1502(4), 617.1502(4) or 605.0904(7), Florida Statutes, this entity is liable for a civil penalty of at least \$500 but not more than \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification. In addition to this civil penalty, the appropriate annual report fees that would have been due this office had the entity qualified the year it began operations in this state are also due. The amount due this office to cover both annual report(s) and penalty fees is \$1193.75.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Octavia L Simmons Regulatory Specialist II

Letter Number: 717A00017232

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www.sunbiz.org

Division of Compositions D.O. POV 6297 Wallahagaaa Florida 29214

COVER LETTER

TO:

Registration Section

Division of Corporat	tions				
SUBJECT: EVENT ONE FX, L	τc				
	Name of	Limited Liability Co	ompany		
The enclosed "Application by Existence, and check are submit	Foreign Limited Liability Comp itted to register the above refere	oany for Authorizati enced foreign limite	on to Tra d liability	insact Business in Florida," Co company to transact business	ertificate of s in Florida.
Please return all correspondent	oe concerning this matter to the	following:			
MATTHEW J	IACKSON				
	N	ame of Person			
EVENT ONE		· — —			
	F	ти/Сотрапу			
PO BOX 141	2				
		Address			
FRANKLIN, 1	TN 37065				
	City/S	tate and Zip Code			
amello@e1fx.			_		
	E-mail address: (to be use	d for future annual r	eport no	ification)	
For further information concer	ning this matter, please call:				
DREW MELLO		at (<u>615</u>) <u>843-433</u>	33	
Nam	se of Contact Person	Area Code	Day	time Telephone Number	
MAILING ADDRESS:		STREET ADDRESS:			
Division of Corporati Registration Section		Division of Corporations Registration Section			
	P.O. Box 6327 Clifton Building				
Tallahassee, FL 3231	4	2661 Executive Center Circle Tallahassee, FL 32301			
Enclosed is a check for the foll	louring amount:				
□ \$125.00 Filing Fee				☐ \$160.00 Filing Fee, Certi of Status & Certified Copy	ficate

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION BILBROX, FLORIDA STATUTES. THE FOLLOHING IS SUBMITTED TO REGISTER A FOREIGN. LIMITED LIMBLITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDAY EVENT ONE FX. LLC (Name of Foreign Lamited Limbidity Company, were exclude Turning Limbidity Company, "L.I.C.," or "LLC.") (If notic associate, our strengts save strengts save strengt for the propers of summaring business in Figure, The photosy rates must selected "Located Lighting Company," "L.L.C." or "L.L.C.") 2. TENNESSEE
[Junctions and the bar of which though bound bubbly company is a sign 3. 45-4200025 (Fill meder, & aufliche) 4 JUN 2012 5. 123 SE PARKWAY COURT #150 6. PO BOX 1412 FRANKLIN, TN 37065 FRANKLIN, TN 37064 7. Name and street address of Florida registered agent: (P.O. Box. NOT acceptable) MARYIN JACKSON Name Office Address: 748 AUTUMN GLEN DRIVE MELBOURNE , Florida <u>32940</u> Registered agent's acceptance: Having been massed as registered agent and to accept service of process for the above stated limited liability company at the place designated in this application, I havely accept the appointment as registered agent and agree to act in this capacity. I further egree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent. \$. The name, title or capacity and address of the person(s) who bas/have authority to macage is/zer: Title or Caracity; Name and Address: Title or Capacity: Name and Address: MOYER FORMICIAL - CARLA MONER OWNER MATTHEW JACKSON CPA 123 SE PARKWAY COURT #150 400 MAIN ST STE. 210 THANKLING IN 37057 FRANKLIN, TH 37064 MANAGER **OREW MELLO** 123 SE PARKWAY COURT #150 THROUGH, THE STORE (Use attachments if necessary) 9. Attached is a certificate of existence, no more than 90 days old, duty authenticated by the official busing oustody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under outh of the translator must be submitted) 10. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, I am aware that any false information submitted in a document to the Department of State titutes a third degree felony as provided for in s.\$17.155, F.S.



Division of Business Services Department of State

State of Tennessee 312 Rosa L. Parks AVE, 6th FL Nashville, TN 37243-1102

EVENT ONE FX, LLC

MATTHEW JACKSON

PO BOX 1412

FRANKLIN, TN 37065

Request Type: Certificate of Existence/Authorization

Request #:

0245116

Issuance Date: 07/21/2017

Copies Requested:

Document Receipt

Receipt #: 003491593

Filing Fee:

\$20.00

July 21, 2017

Payment-Credit Card - State Payment Center - CC #: 3707203208

\$20.00

Regarding:

Event One FX, LLC

Filing Type:

Status:

Limited Liability Company - Domestic

Formation/Qualification Date: 02/21/2012

Active

Duration Term:

Perpetual

Business County: WILLIAMSON COUNTY

Control #:

679063

Date Formed: Formation Locale: TENNESSEE

02/21/2012

Inactive Date:

CERTIFICATE OF EXISTENCE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that effective as of the issuance date noted above

Event One FX, LLC

- * is a Limited Liability Company duly formed under the law of this State with a date of incorporation and duration as given above;
- * has paid all fees, taxes and penalties owed to this State (as reflected in the records of the Secretary of State and the Department of Revenue) which affect the existence/authorization of the business:
- * has filed the most recent annual report required with this office;
- * has appointed a registered agent and registered office in this State;
- * has not filed Articles of Dissolution or Articles of Termination. A decree of judicial dissolution has not been filed.

Secretary of State

Processed By: Cert Web User Verification #: 023401724