M17000010756

(Req	uestor's Name)			
(Add	ess)			
1, 100	000,			
(Addi	ess)			
(City/	State/Zip/Phone #)			
(=,				
PICK-UP	WAIT MAIL			
	MAIL MAIL			
(Busi	ness Entity Name)			
(5)				
(Doci	iment Number)			
Certified Copies	Certificates of Status			
Special Instructions to Fi	ling Officer:			
	Office Use Only			



100328399601

2019 MAY - 7 AM 8: 55

APPROVEL AND FILED

19 MAY -7 AM II: 00

RECEIVED

T GLASS MAY 08 2019



115 N CALHOUN ST., STE. 4 TALLAHASSEE, F№32301 " P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

		Account#: I200000	88000	3
Date:	05/07/2019			
Name:	Joy Weaver			
Reference	 #:10 <u>69030</u>			
		VIVID SEATS LLC	_	
	les of Incorporation/Auth indment	norization to Transact Business		
	nge of Agent	正 元第	2019 HAY -7	
Rein	 istatement 	14 FF1 14 72 43 5	ΛY – .	7
Con	 version 	-14: 	AH	FILED
☐ Mer	jer	# (CO)	8: 55	
Diss	olution/Withdrawal	;	Ċī	
☐ Ficti	tious Name			
☐ Othe	r			
Authorized Signature:	1 2	25		

COGENCY GLOBAL INC. NY, NY 10016 D: +1.212.947.7200 P: 800.221.0102

F: 800.944.6607

●EUROPEAN HQ

COGENCY GLOBAL (UK) LIMITED
REGISTERED IN ETIGLATID & WALES,
REGISTRY *B010712

6 LLOYDS AVE, UNIT 4CL LONDON EC3N 3AX +44 (0)20.3961.3080

@ ASIA PACIFIC HQ COGENCY GLOBAL (HK) LIMITED AHONG KONG LIMITED COMPANY UNIT B, MF, LIPPO LEIGHTON TOWER 103 LEIGHTON RD, CAUSEWAY BAY HONG KONG P: +852.2682.9633

F: +852.2682.9790

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

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

I. Na	nme of the limi	 ted liability company:	rs llc		
2. (a)			(b)		
	•	office address of limited liability company: ofe: MUST BE STREET ADDRESS)		λ	Hailing address of limited liability company: (Note: MAY BE POST OFFICE BOX)
	No Change		_	No Char	ige
	December 1	 9, 2017	_		M17000010756
3.	Date	of filing/registration in Florida	4.		Document number
5. (a)	CTCORP	ORATION SYSTEM			
(,		and Registered Office shown on the records of	the Florida	Dept. of State	:
	1200 \$ PIN	E ISLAND ROAD			
	Registered Offic	Address (MUST BE FLORIDA STREET)	ADDRESS)		
	PLANTAT	ION FL	33324		2019 MAY
(b)	COGENCY	GLOBAL INC.			7 - 7 F/A
	Enter name of $\underline{\mathbf{N}}$	EW Registered Agent and/or NEW Registered I	Office add	<u>ress</u> ;	
	115 North	 Calhoun St., Suite 4			9
	NEW Registere	d Office Address:			55
	Suite 4				
	Tallahasse	e , FL	32301		
the cha agent v was/we	inge or change vill be identica ere authorized	company is not organized under the law are made, the Florida street address of a Florida limited liby an affirmative vote of the members of a tion or the operating agreement of the	the registability con of the limi	tered office npany, it is ted liability	and the business office of the registered thereby confirmed that the change(s) company or as otherwise provided in
	/ Frank Pet			1	Frank Petito
-		or authorized representative of a member			Printed or typed name of signee
provisi the obl to merc	by accept the a ions of all statu ligations of my ely reflect a ch I in writing of	ites relative to the proper and complete position as registered agent as provide unge in the registered office address, I	ree to act performa d for in C hereby co	in this cape nce of my c hapter 605 nfirm that i	icity. I further agree to comply with the luties, and I am familiar with and accept , F.S. Or, if this document is being filed he limited liability company has been
Signatu	re of Registered A	went Tim Manuilla Assistant Sacr	retani		
		Tim Mayville, Assistant Secr	etary		

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

INHS18 (2/14)