N15000036953

(1	Requestor's Name)	
(/	Address)	
(/	Address)	
((City/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(1)	Business Entity Nan	ne)
(I	Document Number)	_
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		
· ·		

Office Use Only



700290098377

09/23/16--01016--010 **35.00



a/21 m

COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: TPG EVENTS, INC. Name of Corporation			
DOCUMENT NUMBER: N15000006953			
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.			
Please return all correspondence concerming this matter to the following:			
TEOBALDO PEREZ Name of Contact Person			
TPG EVENTS, INC. Firm/Company			
16273 LAUREL DRIVE Address			
WESTON - FURIDA 33326 City/State and Zip Code			
TEOPEREZ JR @ GMAIL. COM E-mail address: (to be used for future annual report notification)			
For further information concerning this matter, please call:			
TEOBAL DO PEREZ at (954) 8546454 Name of Contact Person Area Code & Daytime Telephone Number			
Enclosed is a \$35.00 check made payable to the Department of State.			
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301			

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

Pursuant to the provisions of sections 607.10502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida. in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: TPC EVENTS, INC
2. The principal office address: 16273 LAUREL DRIVE
WESTON - FLA 33326
3. The mailing address (if different): SAME ADDRESS
4. Date of incorporation/qualification: 7/20/2015 Document number: N159006958
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
CORPORATION SERVICE COMPANY
1201 HAYS STREET
TAMAHASSEE, FLA 32301
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
MARIA E PEREZ 16273 LAUREL DRIVE P.O. BOX NOT acceptable
16273 LAUREL DRIVE
P.O. Box NOT acceptable WESTON - FLA 33326
WESTON - FLA 33326
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Signature of an officer or director Signature of an officer or director Signature of an officer or director Printed or typed name and title
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree 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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.
1 Janu (ucana Neve) 9/20/2016
Signature of Registered Agent Date If signing on behalf of an entity:
Typed or Printed Name
* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE