PU4000130351

| (Re | equestor's Name) | |
|-------------------------|--------------------|-----------|
| (Ad | ldress) | |
| (Ad | ldress) | |
| (Cit | ty/State/Zip/Phone | #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nam | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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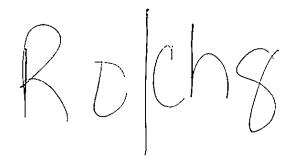
Office Use Only



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FILED 2018 DEC 14 PM 2: 55



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COVER LETTER

| TO: Amendment Section Division of Corporations | | |
|---|--|--|
| SUBJECT: Premierseats, com INC. Name of Corporation PO4000130351 | | |
| DOCUMENT NUMBER: FOO 115 # 208098069 | | |
| The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing. | | |
| Please return all correspondence concerning this matter to the following: | | |
| Name of Contact Person | | |
| Premier Secits. com Firm/Company | | |
| 6900 NW 87th AVR Address | | |
| Parkland FL. 33067. City/State and Zip Code | | |
| E-mail address: (to be used for future annual report notification) | | |
| For further information concerning this matter, please call: 954 587 1405 | | |
| Name of Contact Person at (954) 868 - 7798 Area Code & Daytime Telephone Number | | |
| 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



November 21, 2018

ROBERT C. BROWN PREMIER SEAT. COM, INC. 6900 NW 87TH AVE PARKLAND, FL 33067

SUBJECT: PREMIER SEATS, COM, INC.

Ref. Number: P04000130351

We have received your document for PREMIER SEATS. COM, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton Regulatory Specialist II

Letter Number: 718A00023982

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

| Pursuant to the provisions of sections 607.0502, 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: Premiersæits. Com |
| 2. The principal office address: 6900 NW 81 th Are parx (and, FC. |
| 3. The mailing address (if different): |
| 4. Date of incorporation/qualification: <u>UF 17/2054</u> . Document number: <u>Feet 10 # 2086/8006</u> |
| 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) |
| Robert C. Bown |
| Robert C. BOWN 5485 WILES ROAD SUITE #405 COCONUT CREEK, FL 33073 |
| SUITE #405 COCONUT CREEK, FL 33073 |
| |
| 6. The name and street address of the new registered agent (if changed) and /or registered office (if changed): |
| Robert C. Brown |
| 6900 NW 87th Ave |
| parkland, FC. 33067 |
| 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. |
| Formula of the signature of an officer of director Robert C. Row President 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. |
| Signature of Registered Agent 11/8/18 Date |
| If signing on behalf of an entity: |
| Robert C. Bnwn. Typed or Printed Name |

* * * FILING FEE: \$35.00 * * *