

P07000025457

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

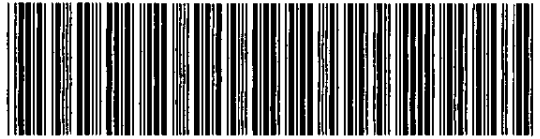
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SECRETARY OF STATE

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Tlew
10-21-08

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Bill Hansen Events, Inc.
(Name of Corporation)

DOCUMENT NUMBER: P07000025457

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:

Bill Hansen
(Name of Contact Person)

Bill Hansen Events, Inc.
(Firm/Company)

2167 South Bayshore Drive
(Address)

Miami, FL. 33133
(City/State and Zip Code)

For further information concerning this matter, please call:

Bill Hansen at (305) 858-6660
(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

LAW OFFICE OF PHILIP JOSEPHSON

A PRIVATE LAW FIRM

PHILIP JOSEPHSON
Admitted in Florida
Admitted in Arizona

2980 McFarlane Road
Suite 204
Miami, Florida 33133
Telephone: (305) 443.3444
Facsimile: (305) 443.3470

October 16, 2008
VIA U.S. CERTIFIED MAIL

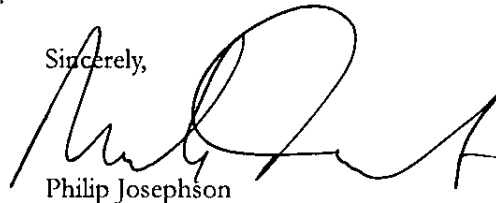
Thelma Lewis
Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Re: Bill Hansen Events, Inc.
Your Letter Number: 608A00048970

Dear Ms. Lewis –

Enclosed is the corrected Statement of Change of Registered Agent for the above-referenced Company. According to your letter (a copy is enclosed), you have the \$35.00 payment and thus, nothing is owed at this time. If this is correct, please file the document indicating the change in Registered Agent. If this is incorrect, please advise me at your earliest convenience.

Sincerely,

A handwritten signature in black ink, appearing to read 'Philip Josephson', written over a horizontal line.

Philip Josephson

Encl.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 5, 2008

BILL HANSEN
BILL HANSEN EVENTS INC.
2167 SOUTH BAYSHORE DRIVE
MIAMI, FL 33133

SUBJECT: BILL HANSEN EVENTS INC.
Ref. Number: P07000025457

We have received your document for BILL HANSEN EVENTS INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A business entity may not serve as its own registered agent. Please designate an individual or another business entity with an active registration or filing with this office, having a Florida street address identical with that of the registered office.

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) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 608A00048970

• **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: Bill Hansen Events, Inc.
2. The principal office address: 2167 South Bayshore Drive, Miami, FL. 33133
3. The mailing address (if different): _____
4. Date of incorporation/qualification: 02/26/2007 Document number: P07000025457
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:

Law Office of Philip Josephson, P.A.

2000 South Dixie Highway, Suite 104

Miami, FL. 33133

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Bill Hansen ~~XXXXXXXXXX~~

2167 South Bayshore Drive

(P.O. Box NOT acceptable)

Miami, FL. 33133

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TALLAHASSEE, FLORIDA

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]
(Signature of an officer or director)

[Signature]
(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]
(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
MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314