P14000058304

(Re	questor's Name)
(Ad	dress)	
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(Cit	y/State/Zip/Phor	ne #1
PICK-UP		MAIL
(Bu	siness Entity Na	ime)
(Do	cument Number	7)
Certified Copies	Certificate	es of Status
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COVER LETTER

TO:

Amendment Section Division of Corporations

SUBJECT. EVENT MAVENS, INC.

Name of Corporation

DOCUMENT NUMBER: P14000058304

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:

A. ANDREW OBEIDY

Name of Contact Person

OBEIDY & ASSOCIATES, PA

Firm/Company

200 S. ANDREWS AVE., STE. 100

Address

FT. LAUDERDALE, FL 33301

City/State and Zip Code

ANDREW@OBDLEGAL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

A. ANDREW OBEIDY

,,305

892-5454

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

statement of char	provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this in the submitted for a corporation organized under the laws of the State of FLORIDA in the control of the state of Florida.
 The name of the control of the principal of the control of the contr	he corporation: EVENT MAVENS, INC. office address: 7330 SW 55TH AVE., MIAMI, FL 33143
3. The mailing ac	ddress (if different):
4. Date of incorp	poration/qualification: 07/09/2014 Document number: P14000058304
	street address of the current registered agent and registered office on file with the tment of State: (If resigned, enter resigned)
	ANDREW OBEIDY
	12000 BISCAYNE BLVD., STE. 503
	MIAMI, FL 33181
6. The name and (if changed):	street address of the new registered agent (if changed) and /or registered office.
	ANDREW OBEIDY
	200 S. ANDREWS AVE., STE. 100
,	P.O. Box NOT acceptable FT. LAUDERDALE, FL 33301
The street addre	ss of its registered office and the street address of the business office of its registered agent, be identical.
	s authorized by resolution duly adopted by its board of directors or by an officer so e board, of the corporation has been notified in writing of the change. When the corporation duly adopted by its board of directors or by an officer so board, of the change. When the corporation duly adopted by its board of directors or by an officer so by a
I hereby accept I further agree to performance of agent. Or, if this hereby confirm to	the appointment as registered agent and agree to act in this capacity. o comply with the provisions of all statutes relative to the proper and complete my duties, and I am familiar with and accept the obligation of my position as registered s document is being filed merely to reflect a change in the registered office address, I that the corporation has been notified in writing of this change. O7/22/2015 Date
If signing on bel	
Andrei	w v Berdy ped or Printed Name

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