

P116000048376

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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☐ MAIL

(Business Entity Name)

(Document Number)

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 1, 2016

PATRICK DELUCA
2996 DUAR TERRACE
NORTH PORT, FL 34291

SUBJECT: PRIME SEATS INC.
Ref. Number: P16000048376

We have received your document for PRIME SEATS 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):

An officer/director must sign authorizing the change of registered agent address.

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.

Rebekah White
Regulatory Specialist II

Letter Number: 316A00023425

[Handwritten signature: Patrick DeLuca]
[Handwritten signature: Mary]

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FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Prime Seats, Inc
Name of Corporation

DOCUMENT NUMBER: P160000048376

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:

Patrick DeLuca
Name of Contact Person

Prime Seats, Inc
Firm/Company

2996 Duar Terrace
Address

North Port, FL 34291
City/State and Zip Code

deluca@ddmediainc.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Patrick DeLuca at 330 417-7448
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 607.0502, 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: Prime Seats, Inc
2. The principal office address: 2996 Duar Terrace, North Port, FL 34291

3. The mailing address (if different): _____

4. Date of incorporation/qualification: 06/01/2016 Document number: F15000004175

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)

Patrick DeLuca

2189 Mistleto Lane

North Port, FL 34286

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

2996 Duar Terrace

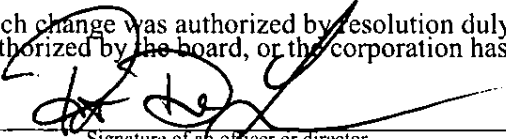
North Port, FL 34291

P.O. Box NOT acceptable

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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

Patrick DeLuca, 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

Date

If signing on behalf of an entity:

Typed or Printed Name

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