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	To:	Division of Co.	nnam1+{ons	
		Division of Co Fax Number	: (850)617-6380	
1:57	From:	Account Number Phone Fax Number	: CAPITOL CORPORATE SERVICES, INC. : I201600000048 : (800)345-4647 : (800)432-3622 for this business entity to be used for future	2022 JUL 14 AM
JL 14 A	annua	l report mailing	gs. Enter only one email address please. ** [m.	9:23
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MAIN EVENT ENTERTAINMENT, INC.

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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 composition: MAIN EVENT ENTERTAINMENT, INC.	
2. The principal office address: 5445 Legacy Drive, Suite 400, Plano, TX 75024	-
3. The mailing address (if different):	-
4. Date of incorporation/qualification: 3/26/2019 Document number: P19000025661	 -
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)	
CT CORPORATION SYSTEM	
1200 SOUTH PINE ISLAND ROAD	
PLANTATION, FL 33324	%
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):	7022 JUL 14
Capitol Corporate Services, Inc.	于
515 East Park Avenue 2nd FI	圣
P.O. Box NOT acceptable	بې
Tallahassee, FL 32301	2
The street address of its registered office and the street address of the business office of its registered agen as changed will be identical.	ι, 🗀
Such change was subscriped by resolution duly adopted by its board of directors or by an officer so authorized by the board of the change.	
Byan McCrory Vice hes	dect
I hereby accept the appointment as registered agent and agree to act in this capacity. I harber agree to comply with the provisious of all statutes relative to the proper and complete performant of my duties, and I and familiar with and accept the obligation of my position as registered agent; Or, if the document is being filed merely to reflect a change in the registered affice address. I hereby confirm that the corporation has been notified in writing of this change.	ce is e:
Signature of Registered Agent Date	
If signing on behalf of an entity:	
Brian Radecki, Assistant Secretary on behalf of Capitol Corporate Services, Inc.	
* * * PILING FEE: \$35.00 * * *	
MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (04/13)	

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