

**2015 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000045673

**Entity Name:** NIGHT OWL ENTERTAINMENT GROUP, LLC

**Current Principal Place of Business:**

1200 GOODLETTE ROAD  
# 11327  
NAPLES, FL 34101

**Current Mailing Address:**

PO BOX 11327  
NAPLES, FL 34101

**FEI Number: 90-0956594**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

IRWIN, RANDY  
1200 GOODLETTE ROAD  
# 11327  
NAPLES, FL 34101 US

*The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.*

**SIGNATURE:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGR  
Name DILEO, ROBIN  
Address PO BOX 11327  
City-State-Zip: NAPLES FL 34101

Title MGR  
Name IRWIN, RANDY  
Address PO BOX 11862  
City-State-Zip: NAPLES FL 34101

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: ROBIN DILEO**

**OWNER/MGR.**

**01/20/2015**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date