

**2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000125250

**Entity Name:** GO SHOW LLC

**Current Principal Place of Business:**

3611 N. ARLINGTON AVE  
TAMPA, FL 33603

**Current Mailing Address:**

3611 N. ARLINGTON AVE  
TAMPA, FL 33603 US

**FEI Number:** 46-3594006

**Certificate of Status Desired:** No

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

GREEN, DARREN  
3611 N. ARLINGTON AVE  
TAMPA, FL 33603 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 MGRM  
Name GREEN, DARREN  
Address 3611 N. ARLINGTON AVE  
City-State-Zip: TAMPA FL 33603

*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:** DARREN GREEN

**OWNER**

**04/30/2018**

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

\_\_\_\_\_  
Date