

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000167001

**Entity Name:** TURN IT ON EVENTS LLC

**Current Principal Place of Business:**

6150 METROWEST BLVD  
SUITE 305B  
ORLANDO, FL 32835

**Current Mailing Address:**

6150 METROWEST BLVD  
SUITE 305B  
ORLANDO, FL 32835 US

**FEI Number:** 90-1030630

**Certificate of Status Desired:** No

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

LARSON ACCOUNTING & CONSULTING SERVICES LLC  
7901 KINGSPONTE PARKWAY  
SUITE 17  
ORLANDO, FL 32819 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:** CAROLINE LARSON

04/28/2016

Electronic Signature of Registered Agent

Date

**Authorized Person(s) Detail :**

Title           MANAGER  
Name           FRACON, MAURICIO  
Address        6150 METROWEST BLVD  
                  SUITE 305B  
City-State-Zip: ORLANDO FL 32835

Title           MANGER  
Name           TORRES, MELISSA  
Address        6150 METROWEST BLVD  
                  SUITE 305B  
City-State-Zip: ORLANDO FL 32835

*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:** MAURICIO FRACON

MANAGER

04/28/2016

Electronic Signature of Signing Authorized Person(s) Detail

Date