

**2024 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L20000195272

**Entity Name:** SFM EVENTS, LLC

**Current Principal Place of Business:**

17755 US HWY 19 N  
SUITE 300  
CLEARWATER, FL 33764

**Current Mailing Address:**

17755 US HWY 19 N  
SUITE 300  
CLEARWATER, FL 33764 US

**FEI Number:** 38-4165748

**Certificate of Status Desired:** No

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

CLEMENT, JASON  
17755 US HWY 19 N  
SUITE 300  
CLEARWATER, FL 33764 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           MANAGER  
Name           SPORTS FACILITIES COMPANIES,  
                  LLC  
Address       17755 US HWY 19 N  
                  SUITE 300  
City-State-Zip: CLEARWATER FL 33764

*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:** BRUCE RECTOR

**GENERAL COUNSEL**

**02/01/2024**

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

\_\_\_\_\_  
Date