

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

; (850)617-6383

From:

Account Name : SANTUCCI, PRIORE & LONG,

Account Number : I20090000107 Phone : (954)351-7474

Fax Number : (954)351-7475

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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|-------|----------|---|--|
| | | | |

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ICARUS PRODUCTIONS OF FL, LLC

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 04 |
| Estimated Charge | \$25.00 |

Electronic Filing Menu

Corporate Filing Menu

Help

Registration Section

TO:

COVER LETTER

| Division of C | orporations | | |
|------------------------------|---|--|---|
| SUBJECT: | ICARUS PROD | OUCTIONS OF FL, LLC | · |
| | | ited Liability Company | |
| The enclosed Articles (| of Amendment and fee(s) are su | bmitted for filing. | |
| Please return all corres | pondence concerning this matter | r to the following: | |
| , | | | · |
| | M | ichael I. Santucci, Esq. | |
| | · | Name of Person | |
| | | Santucci Priore, P.L. | |
| • | | Firm/Company | |
| | 200 Sou | th Andrews Avenue, Ste 10 | 00 |
| | | Address | |
| | For | t Lauderdale, FL 33301 | |
| | | City/State and Zip Code | • |
| | je E-mail address: (| oanna@500law.com to be used for fiture annual report notif | ication) |
| For further information | concerning this matter, please o | ali: | |
| | na E. Lubczanska | at (954) Area Code & Daytim | 351-7474 |
| Name | of Person | Area Code & Daytime | Telephone Number |
| | | | · |
| Enclosed is a check for | the following amount: | | |
| ▼ \$ 25.00 Filing Fee | S30.00 Filing Fee & Certificate of Status | \$55.00 Filing Fee & Certified Copy (additional copy is enclosed | S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |

MAYLING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallabassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

FILED 12 APR 30 AH 8: 47 SECRETARY OF STATE. TALLAHASSEE, FLORIDA

| Name of the Limiter | 3 PRODUC | ITONS OF FL, LI | our records.) | |
|---|---|---|----------------------|--------------------------|
| (| A Plorida Limited I | ny as it now appears on Liability Company) | , | |
| The Articles of Organization for this Limited L Florida document number L1200005 | • | were filed onA | oril 16, 2012 | and assigned |
| This amendment is submitted to amend the following | lowing: | • | | |
| A. If amending name, enter the new name of | of the limited liab | oility company here: | | · |
| The new name must be distinguishable and end wi "L.L.C." | th the words "Lim | ited Liability Company," | the designation " | LLC" or the abbreviation |
| Enter new principal offices address, if applic | One Park Place, Suite 700 | | | |
| (Principal office address MUST BE A STRE) | ET ADDRESS) | 621 Northwest 53rd Street | | |
| | | Boca Raton, Flor | ida 33487 | , |
| Enter new mailing address, if applicable: | | One Park Place, | Suite 700 | |
| <u> Mailing address MAY BE A POST OFFICE</u> | BOX) | 621 Northwest 53rd Street | | |
| | Boca Raton, Florida 33487 | | | |
| B. If amending the registered agent and/ registered agent and/or the new registered or | | | ecords, <u>enter</u> | the name of the new |
| Name of New Registered Agent: | George Zole | эу | · · | |
| New Registered Office Address: | One Park Place, Suite 700, 621 Northwest 53rd Stree | | | |
| | В | oca Raton | . Florida | 33487 |
| | | City | , ~ -v | Zip Code |
| New Registered Agent's Signature, if changing l | Registered Agent: | | | |
| | | | | |

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

| MGR : | ≈ Manager A = Managing Member | | · |
|-------------|--|--|----------------|
| Title | <u>Name</u> | Address | Type of Action |
| | | | Add Remove |
| | | | Add Remove |
| | | | Add Remove |
| | | | Add Remove |
| | | | Add Remove |
| | | | Add |
| D, If a | mending any other information, enter chang | ge(s) bere: (Attach additional sheets, if necessary, |) |
| | Article III: The purpose for which this | Limited Liability Company is organized i | s: |
| | All lawful purposes. | | FIL PR 30 |
| | | | 西兰 [19 |
| | | · · · · · · · · · · · · · · · · · · · | D STATE |
| Dated _ | April 30 , | 012 | |
| | , | or authorized representative of a member O M or printed name of signee | • |
| | ' Typed | or printed name of signee | |

Page 2 of 2

Filing Fee: \$25.00