

M08000002178

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

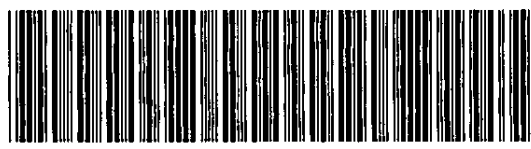
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/22/15--01015--006 **25.00

FILED
15 MAY 22 PM 12:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 26 2015

T. BROWN

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Phoenix Big Cinemas Management LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christine West

Name of Person

Phoenix Theatres Entertainment, LLC

Firm/Company

9111 Cross Park Dr, Ste E275

Address

Knoxville TN 37923

City/State and Zip Code

christinew@phoenixbigcinemas.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christine West at (865) 692-4061 Ext 231
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

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

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- \$25 Filing Fee \$30 Filing Fee & Certificate of Status \$55 Filing Fee & Certified Copy \$60 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Name of limited liability Company as it appears on the records of the Florida Department of State: Phoenix Big Cinemas Management LLC

2. The Florida document number of this limited liability company is: M08000002178

3. Jurisdiction of its organization: Tennessee

4. Date authorized to do business in Florida: 5/8/2008

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: Phoenix Theatres Entertainment, LLC
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida Street Address

_____, **Florida** _____
City *Zip Code*

New Registered Agent's Signature, if changing 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 605, 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

7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
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_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove

9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.

Philip J Zacheretti
 Signature of the authorized representative

Philip J Zacheretti, Manager

Typed or printed name of signee

Filing Fee: \$25.00



STATE OF TENNESSEE
Tre Hargett, Secretary of State
Division of Business Services
William R. Snodgrass Tower
312 Rosa L. Parks AVE, 6th FL
Nashville, TN 37243-1102

PHOENIX THEATRES ENTERTAINMENT, LLC
STE E275
9111 CROSS PARK DR
KNOXVILLE, TN 37923-4532

May 15, 2015

Control # 570926

Effective Date: 05/15/2015

Receipt # : 2059123

Filing Fee: \$20.00

CERTIFICATE OF NAME CHANGE

I, Tre Hargett, Secretary of State of the State of Tennessee, do hereby certify that Articles of Amendment of **PHOENIX BIG CINEMAS MANAGEMENT LLC** were filed in this office on the effective date noted above, changing the name to **Phoenix Theatres Entertainment, LLC**.

A handwritten signature in black ink that reads "Tre Hargett".

Tre Hargett
Secretary of State

Processed By: Nichole Hambrick