[01000005850

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	<i>= #</i>)
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(Do	cument Number)	
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Special Instructions to I	Filing Officer:	
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05/27/04--01020--008 **25.00



WI-5850

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

agent, or both, in the S	2		
1. The name of the lin	nited liability company is: _	Posa Films International, L.L.C.	<u> </u>
2. The mailing address	s of the limited liability com	pany is: 1645 South Rancho Sant	ta Fe, #216,
San Marcos, CA 92		·	
04/16/2001		,522309397 d LOI	- 2820
3. Date of filing/regist	ration in Florida	4. Document number	-"
5. The name of the reg Florida Department		red office address as shown on the rec	ords of the
riorida Department	Fiore, Alexander A.		
	389 Colonial Avenue	lame	
	Ac Marco Island, FL 341	idress 45	
	City, St	ate and Zip	
6. The name and addre	ess of the new registered ager	nt and/or office:	
	Frank Perez-Siam, P.	Α	
	Na 7001 Southwest 87th	me Court	## 1
	Florida street address (P.O. Box NOT acceptable)	
	Miami, FL 33173	FL	基 斯 六 二
		e and Zip	
confirmed that after the and the business office liability company, it is the members of the lin the operating agreemen	e change or changes are made of the registered agent will hereby confirmed that the chaited liability company or as not of the limited liability company.	der the laws of the State of Florida, it e, the Florida street address of the reg be identical. Or, in the case of a Floridange(s) was/were authorized by an afotherwise provided in the articles of opany.	neterna of tion
(Signature of a member or au	thorized representative of a member)		
Alexander Fiore, Ma			
(Printed or typed name of sign		and the state of the same of	· · · · · · · · · · · · · · · · · · ·
I hereby accept the ap comply with the provis and I am familiar with Chapter 608, F.S. Of address, I hereby comp	pointment as registered agen ions of all statutes relative to and accept the obligations of if this document is being file rm that the limited liability of	nt and agree to act in this capacity. It is the proper and complete performant if my position as registered agent as paid to merely reflect a change in the recompany has been notified in writing to	further agree to ce of my duties, provided for in gistered office of this change.
(Signature of Degreened Ages	1		

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314