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EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Academy of Cenema LLC	
(Name o	f Limited Liability Company)
D 0' 14 1	f Limited Liability Company) I Office Change and fee(s) are submitted for filing.
Dear Sir or Madam:	4
The enclosed Registered Agent/Registered	d Office Change and fee(s) are submitted for filing.
Please return all correspondence concerning	
Christian Eubanks	
(Name of Person)	
National Registered Agents, Inc.	
(Firm/Company)	
11600 College Blvd., Suite 210	
(Address)	
Overland Park, KS 66210	
(City/State and Zip Code)	
For further information concerning this ma	atter, please call:
Christian Eubanks	at (_913) 754-0637
(Name of Person)	(Area Code & Daytime Telephone Number)
,	,
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
Enclosed is a check for the follow	ving amount:
✓ \$25 Filing Fee	\$55 Filing Fee & Certified Copy

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. 1. The name of the limited liability company is: Academy of Cinema LLC 2. The mailing address of the limited liability company is: PO Box 540834, Lake Worth, FL 33454 L04000022769 03/25/2004 3. Date of filing/registration in Florida 4. Document number 5. The name of the registered agent and the registered office address as shown on the records of the Florida Department of State: Eric Gordon Name 2424 N Federal Highway Address Boca Raton, FL 33431 City, State and Zip 6. The name and address of the new registered agent and/or office: NRAI Services, Inc. Name 2731 Executive Park Drive, Suite 4 Florida street address (P.O. Box NOT acceptable) Weston City, State and Zip If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company. いしもち いなん (Signature of a member or authorized representative of a member) (Printed or typed name of signee) 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. NRAI Services. Inc.

Christlan Eubanks - Asst. Secretary
Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314
FILING FEE: \$25.00

(Signature of Registered Agent)