

# **2012 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L04000061973

**FILED**  
**Feb 03, 2012**  
**Secretary of State**

**Entity Name:** VISUAL IMPACT STUDIOS INTERNATIONAL, LLC

**Current Principal Place of Business:**

200 SOUTH ORANGE AVENUE  
SUITE 2075  
ORLANDO, FL 32801 US

**New Principal Place of Business:**

155 S. COURT AVE  
1815  
ORLANDO, FL 32801 US

**Current Mailing Address:**

P.O. BOX 1431  
ORLANDO, FL 32802 US

**New Mailing Address:**

**FEI Number:** 06-1737099

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BURKE, STEVEN R CEO  
155. SOUTH COURT AVE, UNIT 1713  
ORLANDO, FL 32801 US

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

BURKE, STEVEN R CEO  
155 S. COURT AVE  
1815  
ORLANDO, FL 32801 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: STEVEN BURKE

02/03/2012

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: BURKE, STEVEN R CEO  
Address: 155 S. COURT AVE, 1815  
City-St-Zip: ORLANDO, FL 32801 US

I hereby certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: STEVEN BURKE

MGRM

02/03/2012

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date