

# 2008 LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L04000091075

**FILED**  
**Feb 29, 2008**  
**Secretary of State**

**Entity Name:** REEL TIME PRODUCTIONS, LLC

**Current Principal Place of Business:**

3199 HUTTERSFIELD CIRCLE  
TALLAHASSEE, FL 32301 US

**New Principal Place of Business:**

109 TYLER TERRACE  
PORT ST. JOE, FL 32456 US

**Current Mailing Address:**

3199 HUTTERSFIELD CIRCLE  
TALLAHASSEE, FL 32301 US

**New Mailing Address:**

109 TYLER TERRACE  
PORT ST. JOE, FL 32456 US

**FEI Number:** 20-2277067      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**  
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

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

GUTHRIE, MICHAEL A  
3199 HUTTERSFIELD CIRCLE  
TALLAHASSEE, FL 32303 US

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

GUTHRIE, MICHAEL A  
109 TYLER TERRACE  
PORT ST. JOE, FL 32456 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: MICHAEL GUTHRIE

02/29/2008

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: MGRM ( ) Delete  
Name: GUTHRIE, MICHAEL A  
Address: 3199 HUTTERSFIELD CIRCLE  
City-St-Zip: TALLAHASSEE, FL 32301 US

Title: MGRM ( ) Delete  
Name: COMBS, RAY E  
Address: 1212 GUERNSEY STREET  
City-St-Zip: ORLANDO, FL 32804 US

**ADDITIONS/CHANGES:**

Title: MGRM (X) Change ( ) Addition  
Name: GUTHRIE, MICHAEL A  
Address: 109 TYLER TERRACE  
City-St-Zip: PORT ST. JOE, FL 32456 US

Title: MGRM (X) Change ( ) Addition  
Name: COMBS, RAY E  
Address: 109 LAKEN LANE  
City-St-Zip: ORLANDO, FL 32804 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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: RAY C. COMBS

MANA

02/29/2008

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