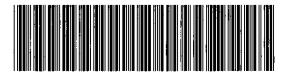
L06000014945

(Care	ratara Nama)				
(кеді	iestor's Name)				
(Addr	ess)				
(Addr	ess)				
(City/:	State/Zip/Phone	e #)			
	·	·			
PICK-UP	MAIT	MAIL			
					
(5)					
(Busii	ness Entity Nan	nej			
(Docu	ment Number)				
Certified Copies	Certified Copies Certificates of Status				
		1			
Special Instructions to Fil	ing Officer:				
		i			
11.18.18.1					

Office Use Only



700188523617

12/13/10--01011--014 **30.00

SECRETARY OF STATE OF

T. HAMPTON

DEC 1 4 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

: 4: 4

SUBJECT:	Revere Entert	<u>ainment Studios, l</u>	LC		
	Name of Lim	ited Liability Company			
The enclosed Article	es of Amendment and fee(s) are sul	bmitted for filing.			
Please return all corr	respondence concerning this matter	r to the following:			
	Walt Griggs				
		Name of Person			
	· 				
23 Alafaya Woods Blvd, #183					
	·	Oviedo, FL 32765			
		City/State and Zip Code			
wgriggs@reverestudios.com E-mail address: (to be used for future annual report notification)					
		•	on nouncation)		
For further informati	on concerning this matter, please of	call:			
	Walt Griggs	at (407)	760-12	24	
Name of Person Area Code & Daytime Telephone Number				ne Number	
Enclosed is a check i	for the following amount:				
525.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is e		660.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED. SECRETARY OF STATE DIVISION OF CORPORATIONS

Zip Code

10 DEC 13 PH 12: 08 Revere Entertainment Studios, LLC. (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) February 2, 2006 The Articles of Organization for this Limited Liability Company were filed on _ and assigned L0600014945 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. 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

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 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.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Bryan Sommer	6226 Crescent Moon Court Windermere, Fl 34786	☐ Add ☑ Remove
<u>MGRM</u>	Tom Thorspecken	5543 Bayside Drive Orlando, FL 32819	☐ Add ☑ Remove
	<u> </u>		∏ Add ∏ Remove
	****		∏ Add ∏ Remove
			∏Add ∏Remove
			∏Add ∐Remove
		er change(s) here: (Attach additional sheets, if necessary.)	
•	Article 4.3 Division of profits a	Revere Entertainment Studios, LLC will be divided	•
-		accordance with the Operating Agreement. If any	
9	changes are made to the perc	centages of profits and losses, every member must	
<u>_</u>	be notified in writing of said ch	hange.	
Dated	DECEMBER 28 Signature of a	a member or authorized representative of a member Walt Griggs Typed or printed name of signee	SECKETARY OF BIVISION OF GORP
		Page 2 of 2	沙
		Filing Fee: \$25.00	OG SHOULD