LD800031128

	(Requestor's Name)
	(Address)
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,	(Business Entity Name)
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EXAMINER



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SECRETARY OF STATE

COVER LETTER

то:	Registration S Division of Co			
SUBJE	ECT:	CINEART A	CQUISITION, LLC	
			ited Liability Company	
The end	closed Articles of	of Amendment and fee(s) are sul	bmitted for filing.	
Please	return all corres	pondence concerning this matter	r to the following:	
		JOE	A. CATARINEAU, E	SQ.
			Name of Person	
_		JO	E A. CATARINEAU, F	PA
			Firm/Company	
		9175	0 OVERSEAS HIGH\	WAY
			Address	
		T	AVERNIER, FL 3307	0
			City/State and Zip Code	
		E-mail address: (E@TAXCATCPA.CO to be used for future annual rep	M ort notification)
For furt	ther information	concerning this matter, please of		
		CATARINEAU, ESQ.	at (_305_)	852-4833
Name of Person		Area Code &	Daytime Telephone Number	
Enclose	ed is a check for	the following amount:		
\$25.	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is e	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Regis Divis	LING ADDRESS: tration Section ion of Corporations Box 6327	Registration	Corporations

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CINEART ACQUISITION, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) MARCH 26, 2008 The Articles of Organization for this Limited Liability Company were filed on ____ and assigned L08000031128 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: **NEW ART MIAMI, LLC** 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 addres Florida City 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

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

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

<u>tle</u>	<u>Name</u>	Address	Type of Action
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			C Demotio

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if amen	ding any other information, enter	change(s) here: (Attach additional shee	ets, if necessary.)
			O9 MA SECRITALLA
	MAY 13 ,	2009 .	Y 15 HASSE
	Signature of a m	tember or authorized representative of a me	~ ~ ~ ~ ~ ~ ~

Page 2 of 2

Filing Fee: \$25.00