

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000043486

Entity Name: IMI ENTERTAINMENT LLC

**FILED**  
**Sep 27, 2010**  
**Secretary of State**

## **Current Principal Place of Business:**

3641 KIRKPATRICK CIRCLE  
UNIT 3  
JACKSONVILLE, FL 32210

## **New Principal Place of Business:**

6450 DICKENS DR  
JACKSONVILLE, FL 32244

## **Current Mailing Address:**

3641 KIRKPATRICK CIRCLE  
UNIT 3  
JACKSONVILLE, FL 32210

## **New Mailing Address:**

6450 DICKENS DR  
JACKSONVILLE, FL 32244

FEI Number: 26-4776774

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

REASER, MARCUS B  
3641 KIRKPATRICK CIRCLE  
UNIT 3  
JACKSONVILLE, FL 32210 US

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

JAMES, ANTONIO  
6450 DICKENS DR  
JACKSONVILLE, FL 32244 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: ANTONIO JAMES

09/27/2010

Electronic Signature of Registered Agent

Date

## **MANAGING MEMBERS/MANAGERS:**

Title: MGRM  
Name: REASER, MARCUS B  
Address: 6450 DICKENS DR  
City-St-Zip: JACKSONVILLE, FL 32244

Title: MGRM  
Name: JAMES, ANTONIO  
Address: 6450 DICKENS DR  
City-St-Zip: JACKSONVILLE, FL 32244

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: ANTONIO JAMES

MGRM

09/27/2010

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