L10000	025772
(Requestor's Name) (Address) (Address)	400230638584
(City/State/Zip/Phone #)	04/23/1201017002 **35.00
(Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer:	DIVISION OF C
Office Use Only	LED CORPORATIONS PH I2: 19
	NAY = 8 2012 T. HAMPTON

ro:	Registration Section
	Division of Corporations

SUBJECT:	Thinking	Cap	Productions,	LLC
			Name of Limited Liability Company	

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Christian Castro Name of Person

Cobo, Welzien, Bowers & Company, LLC

Firm/Company

701 W. Cypress Creek Road, Suite 101 Address

Fort Lauderdale, FL 33309

City/State and Zip Code

CCastro@cwbcpas.com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Christian	Castro	•	

Name of Person

at (<u>954</u>) 739~9000 Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

S25.00 Filing Fee

Certificate of Status

Certified Copy (additional copy is enclosed) S60.00 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



RECEIVED

12 MAY -4 PM 4:00

FLORIDA DEPARTMENT OF STATE Division of Corporations

SECRETARY OF STATE TALLAHASSEE, FLORIDA

April 25, 2012

CHRISTIAN CASTRO COBO WELZIEN BOWERS & COMPANY LLC 701 W CYPRESS CREEK RD - STE 101 FT LAUDERDALE, FL 33309

SUBJECT: THINKING CAP PRODUCTIONS, LLC Ref. Number: L10000025772

We have received your document for THINKING CAP PRODUCTIONS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton Regulatory Specialist II Registration/Qualification Section

Letter Number: 912A00012655

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

12 MAY -4 PH 12: 19

Zip Code

Thinking Cap Product				
(Name of the Limited) (A	Liability Company Florida Limited Li	y as it now appears on ability Company)	our records.)	<u></u>
The Articles of Organization for this Limited Lia Florida document number110000025772	bility Company v 	vere filed on <u>Marc</u>	h 08, 2010	and assigned
This amendment is submitted to amend the follow	wing:			
A. If amending name, enter the new name of t	i <u>he limited liabili</u>	<u>ty company here</u> :		
Thinking Cap Theatre, LLC The new name must be distinguishable and end with "L.L.C."	the words "Limited	d Liability Company," t	he designation "LL	C" or the abbreviation
Enter new principal offices address, if applicable:		1505 NE 5th	Street	
(Principal office address MUST BE A STREET ADDRESS)		Fort Lauderdale, FL 33301		
Enter new malling address, if applicable:		1505 NE 5th Street		
(Mailing address MAY BE A POST OFFICE BOX)		Fort Lauderdale, FL 33301		
B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new</u> registered agent and/or the new registered office address here:				
Name of New Registered Agent:	Cobo, Welz	ien, Bowers &	Company, LI	JC
New Registered Office Address:	New Registered Office Address:701 W Cypress Creek Road, Suite 101			
		Enter Flo	rida street addres.	5 .
	Fort Laud	erdale	Florida 33	301

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, bereby confirm that the limited liability company has been notified in writing of this change.

City

If Changing Registored Agent, Stanature of New Registored Agent

Page 1 of 2

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

чч • Р

<u>Title</u>	Name	Address	Type of Action
<u></u>	<u>.</u> , <u></u>		Add Remove
		, 	Add Remove
			Add
			Add Remove
			Add Remove
			Add Remove
D. If am	ending any other information, enter cha 	nge(s) here: (Attach additional sheets, if necession of the second sheets, if necession of the second sheets, if necession of the second sheets of the secon	<i>πγ.)</i>
• • •			DIVISION
Dated	Signatulge of a notem	2012 ill Total per or authorized representative of a member	RETARY OF STATE SHOF CORPORATIONS
	RICO.	2 todand ad or printed name of signed Page 2 of 2	9 NS
	· ·	Filing Fee: \$25.00	

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