21147.



Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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(((H190000533123)))



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To:

Division of Corporations

Fax Number

: (850)617-6380

From:

: C T CORPORATION SYSTEM Account Name

Account Number : FCA000000023

: (614)280-3338

Phone Fax Number

: (954)208-0845

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

| Email: | Address: | | | |
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| | | | | |

MERGER OR SHARE EXCHANGE

Lions Gate X Productions, LLC



| Certificate of Status | Ú |
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February 22, 2019

FLORIDA DEPARTMENT OF STATE Division of Corporations

ALIBI PRODUCTIONS, LLC. 1630 STEWART STREET **STE 120** SANTA MONICA, CA 90404

SUBJECT: ALIBI PRODUCTIONS, LLC.

REF: L11000024959

 \bigcirc

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

You failed to make the correction(s) requested in our previous letter.

As a condition of a merger, pursuant to s.605.0212(8), Florida Statutes, each party to the merger must be active and current in filing its annual reports with the Department of State through December 31 of the calendar year in which the articles of merger are submitted for filing.

ALIBI PRODUCTIONS, LLC must file the annual report before the articles of merger can be processed. -

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

Tr you have any questions concerning the filing of your document, please call (850) 245-6050.

Rebekar White FAX Aud. #: H19000053312

Regulæory Specialist III

Letter Number: 019A00003792

FILED 2019 FEB 14 AH 10: 03

Articles of Merger For Florida Limited Liability Company

The following Articles of Merger is submitted to merge the following Florida Limited Liability Company(ies) in accordance with s. 605.1025, Florida Statutes.

FIRST: The exact name, form/entity type, and jurisdiction for each merging party are as follows:

Name
Alibi Productions, LLC
Florida
LLC

SECOND: The exact name, form/entity type, and jurisdiction of the surviving party are as follows:

Name
Lions Gate X Productions, LLC
Delaware
LLC

Form/Entity Type
LLC

LLC

<u>THIRD:</u> The merger was approved by each domestic merging entity that is a limited liability company in accordance with ss.605.1021-605.1026; by each other merging entity in accordance with the laws of its jurisdiction; and by each member of such limited liability company who as a result of the merger will have interest holder liability under s.605.1023(1)(b).

| FOU | RTH: Please check one of th | e boxes th | at apply to survivi | ing entity: (if applical | ગોલ) | | | | |
|--|--|------------|----------------------|--------------------------|---------------------|-------------|--|--|--|
| | This entity exists before the merger and is a domestic filing entity, the amendment, it any to its public organic record are attached. | | | | | | | | |
| | This entity is created by the merger and is a domestic filing entity, the public organic record is attached | | | | | | | | |
| | This entity is created by the merger and is a domestic limited liability limited partnership or a domestic limited liability partnership, its statement of qualification is attached. | | | | | | | | |
| \boxtimes | This entity is a foreign entity that does not have a certificate of authority to transact business in this state. The mailing address to which the department may send any process served pursuant to s. 605.0117 and Chapter 48, Florida Statutes is: | | | | | | | | |
| | 2700 Colorado Ave. | | | | | | | | |
| | Santa Monica, CA 90404 | | | | | | | | |
| more | H: If other than the date of fi than 90 days after the date this ENTH: Signature(s) for Each | s documen | t is filed by the Fl | orida Department of | State: | | | | |
| Name | of Entity/Organization: | | Signature(s): | 2 | Name of Individual: | | | | |
| Alibi Productions, LLC | | | Boun A | latitue | B. James Gladston | 10 | | | |
| | | | | | | | | | |
| Corpo | rations: | | n, Vice Chairman | , President er Officer | , | | | | |
| | al partnerships: | _ | | ner or authorized per | son | | | | |
| Florida Limited Partnerships: Signatures of all general partners Non-Florida Limited Partnerships: Signature of a general partner | | | | | | | | | |
| | ed Liability Companies: | | e of an authorized | | | | | | |
| Fees: | For each Limited Liability C | lompany: | \$25.00 | For each Corpora | tion: | \$35.00 | | | |
| | For each Limited Partnership | p; | \$52.50 | For each General | Partnership: | \$25.00 | | | |
| | For each Other Business Ent | litv: | \$25.00 | Certified Copy (| optional); | \$30.00 | | | |