

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000102834

**FILED**  
**Sep 26, 2012**  
**Secretary of State**

**Entity Name:** THE NOIR MOVIE LLC

**Current Principal Place of Business:**

17514 STINCHAR DRIVE  
LAND O LAKES, FL 34638

**New Principal Place of Business:**

**Current Mailing Address:**

614 E. 53RD STREET  
SAVANNAH, GA 31405

**New Mailing Address:**

2 E. 54TH STREET  
SAVANNAH, GA 31405

**FEI Number:** 35-2445076

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FELDMAN, ALEXIS  
17514 STINCHAR DRIVE  
LAND O LAKES, FL 34638 US

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

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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGRM  
**Name:** FELDMAN, BLAKE A  
**Address:** 2 E. 54TH STREET  
**City-St-Zip:** SAVANNAH, GA 31405

**Title:** MGRM  
**Name:** PARKER, JAMES R  
**Address:** 2 E. 54TH STREET  
**City-St-Zip:** SAVANNAH, GA 31405

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:** BLAKE FELDMAN

MGRM

09/26/2012

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