

# L11000114362

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

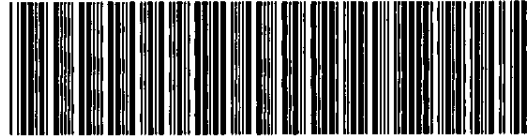
(Business Entity Name)

(Document Number)

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12 FEB 10 PM 2:58  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
EXAMINER  
FEB 13 2012

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: EXHIBITION DYNAMIX 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:

**STEPHEN COUTURE**

Name of Person

**EXHIBITION PRODUCTIONS, LLC.**

Firm/Company

**5310 NORTH CENTRAL AVENUE, SUITE A**

Address

**TAMPA, FLORIDA 33603**

City/State and Zip Code

**SCOUTURE@TAMPABAY.RR.COM**

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

**STEPHEN COUTURE**

Name of Person

at ( **813** )

**234-3090**

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**EXHIBITION DYNAMIX PRODUCTIONS, LLC.**  
**(Name of the Limited Liability Company as it now appears on our records.)**  
**(A Florida Limited Liability Company)**

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TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on OCTOBER 6, 2011 and assigned Florida document number L11000114362.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

EXHIBITION PRODUCTIONS, 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)**

5310 NORTH CENTRAL AVENUE, SUITE A

TAMPA, FLORIDA 33603

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

5310 NORTH CENTRAL AVENUE, SUITE A

TAMPA, FLORIDA 33603

**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 address*

Florida

*City*

*Zip Code*

**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 company has been notified in writing of this change.*

**If Changing Registered Agent, Signature of New Registered Agent**

**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**

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	ANTHONY DOBLIN	105 GALEWOOD DRIVE BRANSON, MO 65616	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove


**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

MARK SMITH'S NEW ADDRESS IS:

6418 AMBROSIA DRIVE, APARTMENT 5417

SAN DIEGO, CA 92124

Dated FEBRUARY 7, , 2012

  
Signature of a member or authorized representative of a member

STEPHEN COUTURE

Typed or printed name of signee

**Page 2 of 2**

**Filing Fee: \$25.00**