# #L12000052305

(Re	equestor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nam	ne)
(De	ocument Number)	
(DC	cument Number,	
Certified Copies	_ Certificates	of Status
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Special Instructions to	Filing Oπicer:	
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FILLED

12 JUL -5 PM 2:51

NEUTRINATION STATE

# **COVER LETTER**

TO: Registration S Division of Co				
SUBJECT:	4D TH	HEATER LLC		
30BBC1.	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sul	bmitted for filing.		
Please return all corresp	ondence concerning this matter	r to the following:		
	BRIAN D. SMITH, ESQ.			_
		Name of Person		
	LAW OFFICES OF BRIAN D. SMITH			_
	Firm/Company			
	420	LINCOLN ROAD #24	8	
		Address		_
	MIAMI BEACH, FLORIDA 33139			
·		City/State and Zip Code		_
	E-mail address: (	dslaw@bellsouth.net to be used for future annual repor	t notification)	
For further information	concerning this matter, please of			
Tot fartier morniation	concerning this matter, preuse t	,	<b>'</b> A	
	D. SMITH, ESQ.	at ( 305 )	672-7000	·
Name	of Person	Area Code & L	Daytime Telephone Numb	er
Enclosed is a check for	the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is end	Certific Colosed) Certific	iling Fee, cate of Status & ed Copy onal copy is enclosed)
MAII	ING ADDRESS:	STREET/CO	OURIER ADDRESS:	

Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED!
12 JUL -5 PM 2:51
SEURETARY OF STATE TALLAHASSEE, PLORIDA

### 4D THEATER LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

	,	ADDII 40 0040	
The Articles of Organization for this Limited Lia		APRIL 18, 2012	and assigned
Florida document number L 12000052	305		
This amendment is submitted to amend the follow	wing:		
A 16	41 15 14 1 15 - 1 154		
A. If amending name, enter the new name of	tne limited hability company n	<u>ere</u> :	
			<del> </del>
The new name must be distinguishable and end with "L.L.C."	n the words "Limited Liability Com	pany," the designation "LLC"	or the abbreviation
Enter new principal offices address, if applica	ble:		
(Principal office address MUST BE A STREET	T ADDRESS)		
	•		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE B	30X)		
			_
			<del> </del>
B. If amending the registered agent and/o	r registered office address on	our records, enter the	name of the new
registered agent and/or the new registered off	ice address here:		
Name of New Registered Agent:	,		
New Registered Office Address:			
New Registered Office Address.	1	Enter Florida street address	
		F1 + 1	
	City	, Florida 7	 Zip Code
	City	2	np coue

### 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGMR	RAFFAELE BERNO	420 LINCOLN ROAD #248 MIAMI BEACH, FLORIDA 33139	Add Remove
MGMR	RAFFAELE BERNA	420 LINCOLN ROAD #248 MIAMI BEACH, FLORIDA 33139	☐ Add ☑ Remove
			Add Remove
	· · · · · · · · · · · · · · · · · · ·		Add Remove
			Add Remove
	·		Add Remove
D. If amend	ling any other information, enter o	change(s) here: (Attach additional sheets, if necessary.)	
			— —
_			_
Dated	JULY 3	2012 .	
	Signature of a m	nember or authorized representative of a member	<del> </del>
		BRIAN D. SMITH, ESQ.	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00