



**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY**

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. Name of the limited liability company: Carnike Motion Pictures Pensacola, LLC
2. (a) Principal office address of limited liability company: 2101 CEDAR SPRINGS ROAD, SUITE 800  
 (Note: MUST BE STREET ADDRESS) DALLAS TX 75201
- (b) Mailing address of limited liability company: 2101 CEDAR SPRINGS ROAD, SUITE 800  
 (Note: MAY BE POST OFFICE BOX) DALLAS TX 75201

5/1/2000 M00000000849  
 3. Date of filing/registration in Florida 4. Document number

5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:  
 Registered Agent: CORPORATION SERVICE COMPANY  
 Registered Office Address: 1201 HAYS STREET  
TALLAHASSEE FL 32301-2325 US

(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:  
NEW Registered Agent: C T Corporation System  
NEW Registered Office Address: 1200 South Pine Island Road  
 (MUST BE FLORIDA STREET ADDRESS) Plantation FL 33324

If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after this change or changes are made, the Florida street address of the registered office and the business office of the registered agent will be identical. Or, in the case of a Florida limited liability company, it is hereby confirmed that the change(s) was/were authorized by an affirmative vote of the members of the limited liability company or as otherwise provided in the articles of organization or the operating agreement of the limited liability company.

Richard B. Hise  
 Signature of a member or authorized representative of a member  
Richard B. Hise  
 Printed or typed name of signer

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 hereby report a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

By: Marie Edwards Marie Edwards Asst. Secretary  
 Signature of Registered Agent

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314  
 FILING FEE: \$25.00

INFIS18 (05/08)

PL015 - 01/09/2013 William H. Baker, Clerk

12 DEC 18 AM 10:12  
 FILED  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA