

MOI 0000 01573

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

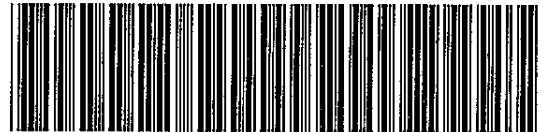
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FILED
04 MAR 22 PM 12:47
TALLAHASSEE, FL 32301

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BARCO PROJECTION SYSTEMS, LLC
(Name of Limited Liability Company)

FLORIDA REGISTRATION NUMBER: M01000001573

The enclosed amendment application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

SHARON KLEIN
(Name of Person)

BARCO, INC.
(Firm/Company)

3240 TOWN POINT DRIVE STE 100
(Address)

KENNESAW, GA 30144
(City/State and Zip Code)

For further information concerning this matter, please call:

SHARON KLEIN at 770-218-3325
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:

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

CR2E055(10/02)

FILED
04 MAR 22 PM 12:47
TALLAHASSEE, FLORIDA

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO
FILE AMENDMENT TO APPLICATION FOR AUTHORIZATION TO
TRANSACTION BUSINESS IN FLORIDA**

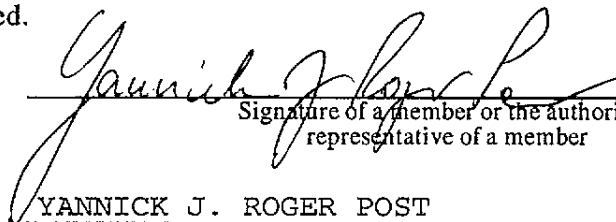
SECTION I (1 - 3 must be completed)

1. Name of limited liability company as it appears on the records of the Florida Department of State:
BARCO PROJECTION SYSTEMS, LLC
2. Jurisdiction of its organization: DELAWARE
3. Date authorized to do business in Florida: 7/13/2001

SECTION II (4 - 7 complete only the applicable changes)

4. If the amendment changes the name of the limited liability company, when was the change effected under the laws of its jurisdiction of organization?
YES
5. New name of the limited liability company: BARCO VISUAL SOLUTIONS, LLC
6. If the amendment changes the period of duration, indicate new period of duration:
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment corrects any false statement, indicate the statement being corrected and the correction: _____
9. Attached is an original certificate, no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.



Signature of a member or the authorized
representative of a member
YANNICK J. ROGER POST

Typed or printed name of signee

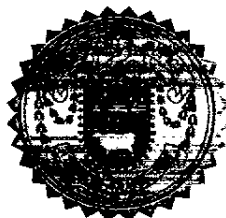
Filing Fee: \$25.00

Delaware

PAGE 1

The First State

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY THE ATTACHED IS A TRUE AND CORRECT COPY OF THE CERTIFICATE OF AMENDMENT OF "BARCO PROJECTION SYSTEMS, LLC", CHANGING ITS NAME FROM "BARCO PROJECTION SYSTEMS, LLC" TO "BARCO VISUAL SOLUTIONS, LLC", FILED IN THIS OFFICE ON THE SIXTH DAY OF FEBRUARY, A.D. 2004, AT 9:14 O'CLOCK A.M.



3221575 8100

040169097

Harriet Smith Windsor

Harriet Smith Windsor, Secretary of State

AUTHENTICATION: 2981385

DATE: 03-10-04