

PO8000065774

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

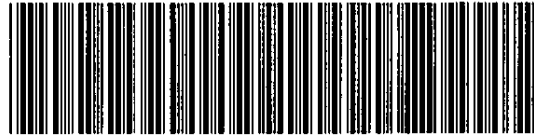
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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08/05/09--01016--007 **35.00

FILED
09 AUG -5 AM 11:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Miss W/NOT
C.COULLETTE

AUG 07 2009

EXAMINER

**STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH
FOR CORPORATIONS**

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the corporation: Backlight Theater Group, Inc.
2. The principal office address: 4665 Raggedy Point Rd., Orange Park, FL 32003
3. The mailing address (if different): _____

4. Date of incorporation/qualification: 10/23/2001 Document number: N01000004961
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)

Mrs. Margaret A. Mann
4665 Raggedy Point Road
Fleming Island, FL 32003

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
09 AUG -7 PM 2:01

6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):

Patrick Devlin Mann
78 Village Walk Lane
Ponte Vedra Beach FL 32082
P.O. Box NOT acceptable

The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.

Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.

Signature of an officer or director

Printed or typed name and title

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 obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.

[Signature]
Signature of Registered Agent

7/15/09
Date

If signing on behalf of an entity:

Typed or Printed Name

*** FILING FEE: \$35.00 ***

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Dissolve Corporation

DOCUMENT NUMBER: PO 8000065774

The enclosed **Articles of Dissolution** and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

EDGAR CHANG
(Name of Contact Person)

AXIS GLOBAL FINANCIAL
(Firm/Company)

7501 NW 4TH ST #203
(Address)

PLANTATION, FL 33317
(City/State and Zip Code)

For further information concerning this matter, please call:

EDGAR CHANG at (954) 638 8443
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$35 Filing Fee ☐ \$43.75 Filing Fee & Certificate of Status ☐ \$43.75 Filing Fee & Certified Copy (Additional copy is enclosed) ☐ \$52.50 Filing Fee, Certificate of Status & Certified Copy (Additional copy is enclosed)

MAILING ADDRESS:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST: The name of the corporation as currently filed with the Florida Department of State:

AXIS GLOBAL FINANCIAL, INC.

SECOND: The document number of the corporation (if known): 70 8000065 774

THIRD: The date dissolution was authorized: MAY 1, 2009

Effective date of dissolution if applicable: _____
(no more than 90 days after dissolution file date)

FOURTH: Adoption of Dissolution (CHECK ONE)

☒ Dissolution was approved by the shareholders. The number of votes cast for dissolution was sufficient for approval.

☐ Dissolution was approved by the shareholders through voting groups.

The following statement must be separately provided for each voting group identified to vote separately on the plan to dissolve:

The number of votes cast for dissolution was sufficient for approval by

(voting group)

Signature: _____

(By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)

EDGAR CHANG

(Typed or printed name of person signing)

OWNER

(Title of person signing)

Filing Fee: \$35

FILED
29 AUG - 5 AM 11:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims against this corporation as provided in s. 607.1407, F.S.

This "*Notice of Corporate Dissolution*" is optional and is not required when filing a voluntary dissolution.

Name of Corporation: AXIS GLOBAL FINANCIAL, INC

Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the *Articles of Dissolution*.

Description of information that must be included in a claim:

Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)

1606 SE 31 CT
MIAMI FL 33035

A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.

EDGAR CHANG

Printed Name of the Person Filing

Edgar Chang

Signature of the Person Filing

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00