I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

MANAGER

SIGNATURE: MARTIN WILEY

13763 FIJI WAY City-State-Zip: MARINA DEL REY CA 90292

Electronic Signature of Signing Authorized Person(s) Detail

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

The above hamed		s registered onice of regis	tered agent, or both, in the State of Florida.
SIGNATURE	E: MARTIN WILEY		12/07/2015
	Electronic Signature of Registered Agent		Date
Authorized	Person(s) Detail :		
Title	MGRM	Title	MGRM
Name	WILEY, MARTIN	Name	SIMMONS, JEFFERSON
Address	3255 NE 184TH STREET SUITE 12304	Address	3255 NE 184TH STREET, SUITE 12304
City-State-Zip:	AVENTURA FL 33160	City-State-Zip:	AVENTURA FL 33160
Title	AUTHORIZED MEMBER		
Name	JOESPH JORDAN LITTLE IRREVOCABLE TRUST OF 2009		
Address	JAMES J LITTLE AND ASSOCIATES		

Name and Address of Current Registered Agent:

SUITE 12304 AVENTURA, FL 33160

Current Mailing Address:

3255 NE 184TH STREET SUITE 12304 AVENTURA, FL 33160 US

FEI Number: APPLIED FOR

WILEY, MARTIN J 3255 NE 184TH STREET

AVENTURA, FL 33160 US

SUITE 12304

3255 NE 184TH STREET, SUITE 12304

2015 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L12000159750

Entity Name: MIAMI FILM REGIONAL CENTER, LLC

Current Principal Place of Business:

Certificate of Status Desired: No

FILED Dec 07, 2015 Secretary of State CR5517122394

> 12/07/2015 Date