## 109000009988

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
:: (Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer:				
, and the second				

Office Use Only



100162170921

11/09/09--01009--005 \*\*\*25.00

O9 NOV -9 PH 1:47
SECRETARY OF STATE ALLAHASSEE, FLORIDA

D. BRUCE

NOV 10 2009

**EXAMINER** 

## **COVER LETTER**

Į	Division of Corporations	•	
SUBJE		ck Films, LLC	
	Name of Limite	d Liability Company	
Dear Sir	or Madam:		
The enc	losed Registered Agent/Registered Office	Change and fee(s) are submitted for	filing.
Please re	eturn all correspondence concerning this n	natter to the following:	
	Michael Hatfield		
•	Name of Person		
	Big Jack Films, LLC Firm/Company		
	12140 Pilot Country Drive	<del></del>	09 NO SECRE
	Spring Hill FL 34610 City/State and Zip Code	·	V-9 PH 1:
E-m	mahjth@msn.com ail address: (to be used for future annual report notificate	ion)	1
For furtl	her information concerning this matter, ple	ease call:	
<u></u>	Michael Hatfield at (at (	813 ) 917-4121  Area Code & Daytime Telephone Nu	mber
1 1 (	STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Fallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314	
j	Enclosed is a check for the following am	ount:	
V	25 Filing Fee	\$55 Filing Fee & Certified Co	ру

## 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:	Big Jack Films, LLC			
2. (a) Principal office address of limited liability company:	12140 Pilot Country Drive			
(Note: MUST BE STREET ADDRESS)	Spring Hill, FL 34610			
(b) Mailing address of limited liability company:	12140 Pilot Country Drive			
(Note: MAY BE POST OFFICE BOX)	Spring Hill, FL 34610			
01/30/2009	L0900009988			
3. Date of filing/registration in Florida	. Document number			
5. (a) Registered Agent and Registered Office shown on the records of the Florida Dept. of State:				
Registered Agent:	Michael Hatfield			
	12140 Pilot Country Frive Spring Hill, FL 346105			
(b) Enter name of NEW Registered Agent and/or NEW Registered Office address:  NEW Registered Agent: registered agent the same as above				
- · · · · · · · · · · · · · · · · · · ·				
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	12140 Pilot Country Drive			
	Spring Hill ,FL 34610			
If the limited liability company is not organized under the laws of the State of Florida, it is hereby confirmed that after the 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 of the operating agreement of the limited liability company.  Signature of a member or authorized representative of a member				
Michael Hatfield				
Printed or typed name of signee				
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.  Signature of Registered Agent				

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