

L09000052194

(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:

Office Use Only



600156036366

05/28/09--01022--011 **130.00

SECRETARY OF STATE
TELEPHONE 1-800-334-7353

09 MAY 28 PM 3:34

FILED

S. HAWKES

MAY 29 2009

EXAMINER

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: EPIC EG LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

SCOTT WOOLLEY

Name of Person

EPIC ENTERTAINMENT GROUP

Firm/Company

6001 PARK OF COMMERCE BLVD

Address

BOCA RATON, FL 33487

City/State and Zip Code

✓ SCOTT@EPICEG.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

SCOTT WOOLLEY

Name of Person

at (561) 279-7827

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☒ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

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

Street/Courier Address

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

EPIC EG LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

6001 PARK OF COMMERCE BLVD
BOCA RATON, FL 33487

Mailing Address:

6001 PARK OF COMMERCE BLVD
BOCA RATON, FL 33487

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

SCOTT WOOLLEY

Name

6001 PARK OF COMMERCE BLVD

Florida street address (P.O. Box **NOT** acceptable)

BOCA RATON FL 33487 FL

City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, 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 relating 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..



Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED
09 MAY 28 PM 3:34
TALLAHASSEE, FL
SECRETARY OF STATE

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

SCOTT WOOLLEY

6001 PARK OF COMMERCE BLVD

BOCA RATON FL 33487

MGRM

HENRY SCHNEIDMAN

11663 PARADISE COVE LANE

WELLINGTON FL 33449

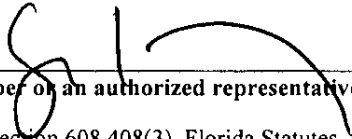
(Use attachment if necessary)

FILED
09 MAY 28 PM 3:34
TALLAHASSEE FLORIDA
SECRETARY OF STATE

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

SCOTT WOOLLEY

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)