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SECRELARY OF STATE
AND AHASSEE, FLORIDA

J. BRYAN

AUG 31 2010

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: EPIC FILMS, LLC (Name of Limited Liability Co.)	ompany)
The enclosed member, managing member or manager resifiling.	gnation and fee(s) are submitted for
Please return all correspondence concerning this matter to	e:
Matthew Binns	
(Contact Person)	SECT
Epic Films, LLC	ARA TIL
(Firm/Company)	HASSEE
1314 E. Las Olas Blvd., Suite 5	AUG 30 PM 2: 53 LAHASSEE, FLORIDA
(Address)	ATE RIDA
Fort Lauderdale, FL 33301	ŕ
(City/State and Zip Code)	_
For further information concerning this matter, please call	l:
Matthew Binns at (305	₎ 801 8161
(Name of Contact Person) (Area Cod	le & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida \$25 Filing Fee	Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	e limited liability company as it a PIC FILMS, LLC	ppears on the records of	the Florida Department
2. This limited lia Florida	bility company was organized un	der the laws of:	SECONE TALLAI
3. The Florida do L9900000	cument/registration number of thi	_·	R 2: 5
_{4. I,} Sebastiar	n Serrell-Watts	_, hereby resign as a Ma	anaging Member
(Print	Name of Person Resigning)	_ , ,	(Print Title)
of this limited li	ability company and affirm the ling riting.	mited liability company h	as been notified of my
Signature of Re	signing Member, Managing Mem	ber or Manager	
	, -	~ `	
Filing Fee:	\$25.00 (Required)		
Certified Copy	\$30.00 (Ontional)		