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T. HAMPTON
AUG 8 1 2010
EXAMINER

COVER LETTER

TO:	Registration Section Division of Corporations			
SUBJ	JBJECT: EPIC FILMS, LLC			
	Name of Limited Liability Company			
Dear S	Sir or Madam:			
The e	nclosed Registered Agent/Registered	Office C	hange and fee(s) are submitted for filing.	
Please	return all correspondence concerning	g this ma	atter to the following:	
	Matthew Binns			
	Name of Person			
	Epic Films, LLC			
	Firm/Company			
	1314 E. Las Olas Blvd., Suit	e 5		
	Address			
	Fort Lauderdale, FL 3330	1		
	City/State and Zip Code			
epicfilms@earthlink.net E-mail address: (to be used for future annual report notification)				
E	-mail address: (to be used for future annual report	notificatio	n)	
For fu	rther information concerning this mat	tter, plea	se call:	
	Matthew Binns	at (305) 801 8161	
	Name of Person		Area Code & Daytime Telephone Number	
	STREET/COURIER ADDRESS: MAILING ADDRESS:		MAILING ADDRESS:	
	Registration Section		Registration Section	
	Division of Corporations		Division of Corporations	
	Clifton Building		P.O. Box 6327	
	2661 Executive Center Circle Tallahassee, Florida 32301		Tallahassee, Florida 32314	
Enclosed is a check for the following amount:				
	\$25 Filing Fee		\$55 Filing Fee & Certified Copy	

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:	Epic Films, LLC
2. (a) Principal office address of limited liability company	: 1314 E. Las Olas Blvd., Suite 5
(Note: MUST BE STREET ADDRESS)	Fort Lauderdale, FL 33301
(b) Mailing address of limited liability company:	Epic Films, LLC
(Note: MAY BE POST OFFICE BOX)	1314 E. Las Olas Blvd., Suite 5 Fort Lauderdale, FL 33301
June 29, 1999	L9000003870
3. Date of filing/registration in Florida	4. Document number
5. (a) Registered Agent and Registered Office shown on t	he records of the Florida Dept. of State:
Registered Agent:	Sebastian Serrell-Watts
Registered Office Address:	6014 SW 33rd Street Miami, FL 33155
(b) Enter name of <u>NEW Registered Agent</u> and/or <u>NEW</u> <u>NEW</u> Registered Agent:	V Registered Office address: Matthew Binns
NEW Registered Office Address: (MUST BE FLORIDA STREET ADDRESS)	Epic Films, LLC 1314 E. Las Olas Blvd., Suite 5 Fort Lauderdale ,FL 33301
If the limited liability company is not organized under the laconfirmed that after the change or changes are made, the Fl and the business office of the registered agent will be identifiability company, it is hereby confirmed that the change(s) of the members of the limited liability company or as other or the operating agreement of the limited liability company. Signature of a member or authorized representative of a member Alissa Allen Printed or typed name of signee I hereby accept the appointment as registered agent and accomply with the provisions of all statutes relative to the product of the provisions of all statutes relative to the product of the provisions of the obligations of my post Chapter 678, F.S. Or, if this document is being filed to mendadress, thereby confirm that the limited liability company. Signature of Registered Agent	orida street address of the registered office ical. Or, in the case of a Florida limited was/were authorized by an affirmative vote wise provided in the articles of organizations. All CORPORATION OF C