



State of California Secretary of State

STATEMENT OF INFORMATION (Limited Liability Company)

43

Filing Fee \$20.00. If amendment, see instructions.

IMPORTANT — READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

1. LIMITED LIABILITY COMPANY NAME (Please do not alter if name is preprinted.)

Motion Picture Expendables and Services L.L.C.

FILED
in the office of the Secretary of State
of the State of California

FEB 14 2011

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DUE DATE:

FILE NUMBER AND STATE OR PLACE OF ORGANIZATION

2. SECRETARY OF STATE FILE NUMBER

201102510060

3. STATE OR PLACE OF ORGANIZATION

California

COMPLETE ADDRESSES FOR THE FOLLOWING (Do not abbreviate the name of the city. Items 4 and 5 cannot be P.O. Boxes.)

4. STREET ADDRESS OF PRINCIPAL EXECUTIVE OFFICE

1016 Chantilly Cir.

CITY AND STATE

Santa Ana

CA

ZIP CODE

92705

5. CALIFORNIA OFFICE WHERE RECORDS ARE MAINTAINED (DOMESTIC ONLY)

1016 Chantilly Cir.

CITY

Santa Ana

STATE

CA

ZIP CODE

92705

NAME AND COMPLETE ADDRESS OF THE CHIEF EXECUTIVE OFFICER, IF ANY

6. NAME

ADDRESS

CITY AND STATE

ZIP CODE

NAME AND COMPLETE ADDRESS OF ANY MANAGER OR MANAGERS, OR IF NONE HAVE BEEN APPOINTED OR ELECTED, PROVIDE THE NAME AND ADDRESS OF EACH MEMBER (Attach additional pages, if necessary.)

7. NAME

ADDRESS

CITY AND STATE

ZIP CODE

Michael Cybulski

1016 Chantilly Cir.

Santa Ana

CA

92705

8. NAME

ADDRESS

CITY AND STATE

ZIP CODE

Bruce Wonderlick

1016 Chantilly Cir.

Santa Ana

CA

92705

9. NAME

ADDRESS

CITY AND STATE

ZIP CODE

Fernando Silva

1016 Chantilly Cir.

Santa Ana

CA

92705

AGENT FOR SERVICE OF PROCESS (If the agent is an individual, the agent must reside in California and Item 11 must be completed with a California address. If the agent is a corporation, the agent must have on file with the California Secretary of State a certificate pursuant to Corporations Code section 1505 and Item 11 must be left blank.)

10. NAME OF AGENT FOR SERVICE OF PROCESS

Legalzoom.com, Inc. 02967349

11. ADDRESS OF AGENT FOR SERVICE OF PROCESS IN CALIFORNIA, IF AN INDIVIDUAL

CITY

STATE

ZIP CODE

CA

TYPE OF BUSINESS

12. DESCRIBE THE TYPE OF BUSINESS OF THE LIMITED LIABILITY COMPANY

Direct Sales - Catalog

13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

Barbara Dang

TYPE OR PRINT NAME OF PERSON COMPLETING THE FORM

SIGNATURE

Authorized Rep.

TITLE

02/09/2011

DATE

LLC-12 (REV 05/2005)

APPROVED BY SECRETARY OF STATE