



State of California Secretary of State

L**32**

STATEMENT OF INFORMATION (Limited Liability Company)

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

IMPORTANT — READ INSTRUCTIONS BEFORE COMPLETING THIS FORM1. **LIMITED LIABILITY COMPANY NAME** (Please do not alter if name is preprinted.)SARGENT HALLPRODUCTIONS, LLC
1880 CENTURY PARK EAST ST 950
LOS ANGELES, CA 90067**FILED**
in the office of the Secretary of State
of the State of California**MAY 26 2010**

This Space For Filing Use Only

DUE DATE:**FILE NUMBER AND STATE OR PLACE OF ORGANIZATION**

2. SECRETARY OF STATE FILE NUMBER

200802610043

3. STATE OR PLACE OF ORGANIZATION

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

CITY AND STATE

ZIP CODE

9229 SUNSET BLVD. SUITE 620

WEST HOLLYWOOD CA

90069

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

CITY

STATE

ZIP CODE

9229 SUNSET BLVD. SUITE 620

WEST HOLLYWOOD

CA

90069

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

CHRISTOPHER GRACE

9229 SUNSET BLVD. SUITE 620

WEST HOLLYWOOD, CA

90069

8. NAME

ADDRESS

CITY AND STATE

ZIP CODE

GORDON KAYWIN

9229 SUNSET BLVD. SUITE 620

WEST HOLLYWOOD, CA

90069

9. NAME

ADDRESS

CITY AND STATE

ZIP CODE

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

STEVE GELON

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

CITY

STATE

ZIP CODE

C/O MANN GELON & GLODNEY; 1880 CENTURY PK E #950

LOS ANGELES

CA

90067

TYPE OF BUSINESS

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

PRODUCTION COMPANY

13. THE INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT.

STEVE GELON

TYPE OR PRINT NAME OF PERSON COMPLETING THE FORM

SIGNATURE

CPA

TITLE

05/21/2010

DATE