

L22000105742

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

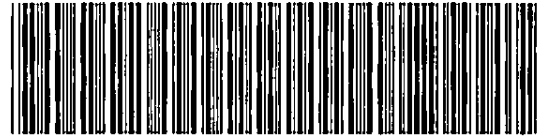
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LLC
member Resign

01/10/23

DC

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Naked Factory Films, LLC
(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing. Please return all correspondence concerning this matter to:

Stephen Sweeney

~ (Contact Person)

Naked Factory Films, LLC

~ (Firm/Company)

5334 Fountains Drive S

~ (Address)

Lake Worth, FL

~ (City/State and Zip Code)

For further information concerning this matter, please call:

Stephen Sweeney at (917 504-9429)

(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

Mailing Address: Street Address:

Registration Section Registration Section Division of Corporations Division of
Corporations P.O. Box 6327 The Centre of Tallahassee Tallahassee, FL 32314 2415
N. Monroe Street, Suite 810 Tallahassee, FL 32303



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

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

(Pursuant to 605.0216, Florida Statutes)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Naked Factory Films, LLC

2. The Florida document/registration number assigned to this limited liability company is:

L22000105742

3. The date this member/manager withdrew/resigned or will withdraw/resign is:

09/17/2022

4. I, hereby withdraw/resign as a

Raphael Connor

(Print Name of Person Resigning)

A.P.

(Print Title)

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STATE DEPT OF FLORIDA
TALLAHASSEE, FLORIDA

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)

Certified Copy: \$30.00 (Optional)