

biz.org/scripts/efilcovr.ex-

lorida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H09000173265 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: CORPDIRECT AGENTS, INC.

Account Number : 110450000714

: (850) 222-1173

Phone Fax Number

: (850)224-1640

REGISTERED AGENT RESIGNATION

ACADEMY OF CINEMA LLC

الرابي والمناف والمرافي المطلع الماه المهوم الر	
Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$87.50*

\$85.00

000 a77.

Electronic Filing Menu

Corporate Filing Menu

C.COUNDETTE

JUL 3 1 2009

EXAMINER

07/30/2009 01:25 PM

H09000173265 3

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of	section 608.416(2) or 60	8.509, Florida Statutes, the u	ndersigned,	
Eric	A. Gordon, Esq.	hereby	resigns as	
	e of Registered Agent			
Registered Agent for	Ace	ademy of Cinema LLC		
	Name of Limited Liabi	lity Company	<u> </u>	
L04000022	2769			
Document Number,	if known			
A copy of this resignation wa	s mailed to the above list	ted limited liability company	at its last known address.	
The agency is terminated and	经工	on the 31st day after the date	on which this statement is filed.	
If signing on behalf of an ent	ity:		O9 JUL 30 SECRETARY ALLYAHASSE	
_	Typed or Pr	rinted Name	L 30 L 30 ASSE	
	Сарасі	ià	AM 9:	7
	FILING FEES: \$85.00 Active \$25.00 Admit withd	e limited liability company olstratively dissolved/ volum Irawn limited liability comp	ntarily dissolved/	

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

INHS17 (08/05)