10400038685

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	; #)
. PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
•		
	Office Use Onl	lv



900112946849

12/11/07--01024--011 **55.00

O7 DEC || PM |: L5
SECRETARY OF STATE

DB 12/11

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: HITS! Entertainment Systems (Name of Limited Liabili	
(Name of Limited Liabili	ty Company)
The enclosed member, managing member or manager filing.	resignation and fee(s) are submitted for
Please return all correspondence concerning this matter	er to:
Robert Pitzer	
(Contact Person)	
4FX Design	O7 D
(Firm/Company)	DEC 11
PO Box 8300	jini ~ "
(Address)	FS - F
Tucson, AZ 85738	PM 1: 45 OF STATE E. FLORIDA
(City/State and Zip Code)	•
For further information concerning this matter, please	call:
Robert Pitzer at (60	02_) 300-9356
(Name of Contact Person) (Area	Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Floring Fee	rida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE : DIVISION OF CORPORATIONS

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

	mited liability company as it a		of the Flori	da Dep	artmo	ent
	ty company was organized un			SECRETARY O	07 DEC 11 PM	
3. The Florida docum	nent/registration number of thi	is limited liability; comp	oany is:	FLORIDA	H :: 1:5	
of this limited liabi	ne of Person Resigning) lity company and affirm the li		(Prin	<i>t Title)</i> notifie	d of n	- ny
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)	·				•