

LD5000106189

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Erotic Signature LLC  
(Name of Limited Liability Company)

The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Fritz Romeus  
(Contact Person)

Erotic Signature LLC  
(Firm/Company)

P.O. BOX 014837  
(Address)

MIAMI FL 33101  
(City/State and Zip Code)

For further information concerning this matter, please call:

Fritz Romeus at ( 786 970-9296 ) 305 306-1224 FL  
(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

**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



**EROTIC SIGNATURE, LLC**  
1800 North Bayshore Drive, #1415  
Miami, Florida 33132 | U.S.A.

Dear Sir/Madam,

My name is James Robert Kirkpatrick III. This letter is to inform you that I have resigned from Erotic Signature, LLC. I will therefore need to have my name removed from all accounts pertaining to this company.

You can reach me at 954-336-6710 if you have any questions.

Thank you

James Robert Kirkpatrick III  
06/24/2008

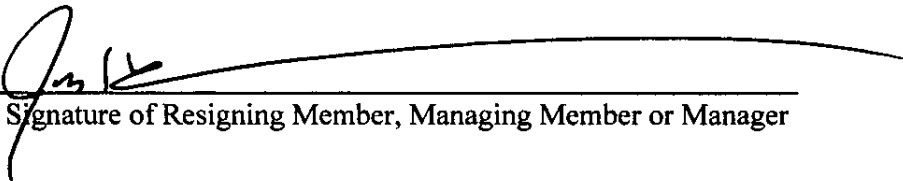


FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

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TALLAHASSEE FLORIDA

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

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Erotic Signature LLC
2. This limited liability company was organized under the laws of:  
The State of Florida
3. The Florida document/registration number of this limited liability company is:  
L05000106189
4. I, James Kirkpatrick, hereby resign as a MGRM  
*(Print Name of Person Resigning)* *(Print Title)*  
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

  
\_\_\_\_\_  
Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)