L06000067902

(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ddress)	· · ·
(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		
	,	

Office Use Only



300145397923

03/16/09--01013--002 **350.00



D9 MAR 16 PM 1: 15 SECRETARY OF STATE

B. KOHR

MAR 1 6 2009

EXAMINER

CAPITAL CONNECTION, INC

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Walk-In

Will Pick Up

What IF Entertainment, LLC	
Thank you!	Art of Inc. File
Signature	Fictitious Owner Search Vehicle Search Driving Record
Requested by: Name S C Am Date Time	UCC 11 Search

Courier



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

1. The name of the limited liability company as it ap of State is: What If Entertainment, LLC	
This limited liability company was organized und Florida	ler the laws of:
3. The Florida document/registration number of this L06000067902	limited liability company is:
_{4. I,} Eric Campbell	, hereby resign as a Managing Member
(Print Name of Person Resigning)	(Print Title)
of this limited liability company and affirm the limitesignation in writing.	uited liability company has been notified of my
1 122	
Signature of Resigning Member, Managing Memb	er or Manager

\$25.00 (Required) \$30.00 (Optional)

Filing Fee: Certified Copy: