Florida Department of State

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To:

Division of Corporations

Fax Number

: (850)617-6390

From:

Account Name : ALA REGISTERED AGENT INC.

Addount Number : T20090000032

: (866)703-8828

Fax Number

: (561)202-8082

REGISTERED AGENT RESIGNATION

AGME PRODUCTIONS LLC

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11/02/2009 11:52

09:54A FROM:A1A REGISTED AGENT I (561) 202-8082

TO:18506176380

P.a

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RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of sect	ion 608.416(2) or 608.509, Flori	ida Statutes, the undersigned,		
A1A REGISTERED AGENT INC. , hereby resigns as				
Name of	Registered Agent	, ,		
Registered Agent for	AGME PRODUCTIONS LLC			
	Name of Limited Liability Company	у		
L0800008184				
Document Number, If kr			-4.1	
A copy of this resignation was in	ailed to the above listed limited I	liability company at its last known	i address.	
The agency is terminated and the	office discontinued on the 31st of Jung Ma Signbure of Resignin	day after the date on which this st.	gtement is filed,	
If signing on behalf of an entity:			6	5. <u>.</u> .
	TINA MAKI Typed or Printed Name		ADN 60	SECSE SECSE
	PRESIDENT Capacity		-2	77. 77.
			AM '9: 18	11S 30
	FILING FEES: \$ 85.00 Active limited lia \$ 25.00 Administratively withdrawn limite	ability company dissolved/voluntarity dissolved/ ed liability company	ž	Ħ

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

INHS17 (08/05)

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