608000019039

| (Re | questor's Name) | |
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| (Ad | dress) | |
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| (Cit | y/State/Zip/Phone | e #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nar | ne) |
| (Document Number) | | |
| Certified Copies | _ Certificates | s of Status |
| Special Instructions to Filing Officer: | | |
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| | | |
| 789 707 | 671 | |

Office Use Only

L08-19039



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07/16/08--01017--017 **35,00 FILED FILED FILED

M. THOMAS

AUG - 1 2008

EXAMINE:

COVER LETTER

| TO: Registration Division o | on Section of Corporations | |
|---|--|---|
| SUBJECT: | relmar Studi (Name of Lim | ited Liability Company) |
| The enclosed men filing. | nber, managing member o | manager resignation and fee(s) are submitted fo |
| Please return all co | orrespondence concerning | this matter to: |
| Clera z | (Contact Person) | |
| Kelmar " | Studios, LL | |
| 7938 Pric | nceton Manor (Address) | ircle |
| lakeland | +c 33809 (City/State and Zip Code) | |
| For further informa | ation concerning this matte | er, please call: |
| Cleros J (Name of | Yencibio f Contact Person) | at (SloS) 669-7155 (Area Code & Daytime Telephone Number) |
| | nd a check made payable t \$25 Filing Fee | o the Florida Department of State for: \$55 Filing Fee & Certified Copy |
| STREET/COURI Registration Section Division of Corpora Clifton Building 2661 Executive Ce Tallahassee, Florid | on rations enter Circle | MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 |

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE Division of Corporations

July 17, 2008

ELENA ARENCIBIA KELMAR STUDIOS, LLC 7938 PRINCETON MANOR CIRCLE LAKELAND, FL 33809

SUBJECT: KELMAR STUDIOS, LLC

Ref. Number: L08000019039

We have received your document for KELMAR STUDIOS, LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please ea (850) 245-6097.

Marsha Thomas Regulatory Specialist II

Letter Number: 008A000418523

AUG-1 PH 1:0



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 appears on the records of the Florida Department |
|----------------------|--|
| of State is: | Helmar Studios, LLC |
| | |
| 2. This limited liab | oility company was organized under the laws of: |
| Flo | mda |
| | |
| 3. The Florida doc | ument/registration number of this limited liability company is: |
| | $ \frac{\phi\phi\phi}{19039} $ |
| <u> </u> | $\varphi \varphi \varphi \cap \varphi $ |
| 4. I, Clera | Arencibia, hereby resign as a Business Manager |
| (Print N | lame of Person Resigning) (Print Title) |
| | bility company and affirm the limited liability company has been notified of my |
| resignation in wr | iting. |
| | 10 Jo |
| Signature of Pag | MACCINIO In the Indian Inches I was a second |
| Signature of Res | gning Member, Managing Member of Manager |
| | |
| Filing Fee: | \$25.00 (Required) |
| Certified Copy: | \$30.00 (Optional) |