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(Requestor's Name)		
(Address)		
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(Address)		
(City/State/Zip/Phone #)		
PICK-UP	MAIT	MAIL
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(Bu	isiness Entity Nam	e)
(Document Number)		
Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
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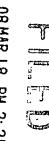
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SECRETARY OF STATE



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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: MVX PRODUCTIONS LL	С
50D5201.	Liability Company)
The enclosed member, managing member or ma filing.	nager resignation and fee(s) are submitted for
Please return all correspondence concerning this	matter to:
Fred Greenberg	
(Contact Person)	
MVX Productions LLC	
(Firm/Company)	
17689 Charnwood Drive	
(Address)	
Boca Raton, Fl 33498	
(City/State and Zin Code)	
For further information concerning this matter, p	olease call:
Fred Greenberg	732 996-9862
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to th	e Florida Denartment of State for
\$25 Filing Fee	\$55 Filing Fee &
V the thing to	Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	~ · · · · · · · · ·
CR2E079 (5/06)	
17888 OLA MAGO URAS AGGA	



08 MAR 18 PM 2: 24 SECRETARY OF STATE TALLAHASSEE FLORIDA

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

	limited liability company as X PRODUCTIONS L	it appears on the records of the Florida Department LC
2. This limited liab	nility company was organized	under the laws of:
	ument/registration number o	f this limited liability company is:
_{4. I,} Lakrids Ho	oldings Limited	, hereby resign as a MGRM
(Print N	lame of Person Resigning)	(Print Title)
of this limited lia resignation in wr		e limited liability company has been notified of my
- Jula	Affolly Lente	, Male Book of
Signature of Res	igning Member, Managing N	fember or Manager
	,	
Filing Fee:	\$25.00 (Required)	
Cartified Conv.	\$30.00 (Ontional)	