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| questor's Name) | | | | | |
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| _ Certificates | s of Status | | | | |
| Special Instructions to Filing Officer: | | | | | |
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Office Use Only



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2015 SEP 24 P 4: 30
SECRETARY OF STATE
TALLAHASSEE. FLORIDA

FILED

Strip und

COVER LETTER

| TO: Registration Section | | | | |
|---|-----------------------|--|--------------------------|----|
| Division of Corporations | | | | |
| SUBJECT: Adult Erotic Connection.c | om LLC | | | _ |
| (Name of | Limited Liability Con | npany) | | - |
| The enclosed member, resignation or diss | sociation and fee(s |) are submitted | for filing. | |
| Please return all correspondence concerni | ing this matter to: | | | |
| Michel K Snow Sr. | | | | |
| (Contact Person) | | _ | | |
| Snow's Global Connection | | | | |
| (Firm/Company) | | _ | | |
| 3771 Lake Shore Dr. | | | | |
| (Address) | | _ | | |
| Palm Harbor Florida 34684 | | | | |
| (City/State and Zip Code) | | _ | 28: SE TAL | |
| For further information concerning this m | natter, please call: | | 2015 SEP 24 SECRETARY | 77 |
| Michael K Snow Sr. | 813 at (| 863-1154 | 24 SSEE. | |
| (Name of Contact Person) | | & Daytime Tele | phone Number) | O |
| Enclosed please find a check made payab \$25 Filing Fee | | Department of S g Fee & Certifie | | |
| | | | | |
| STREET/COURIER ADDRESS: | MAILING A | | | |
| Registration Section | Registration Section | | | |
| Division of Corporations | | Division of Corporations P.O. Box 6327 | | |
| Clifton Building 2661 Executive Center Circle | | | | |
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CR2E079 (2/14)

Tallahassee, Florida 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

(Pursuant to 605.0216, Florida Statutes)

| | limited liability company as t Erotic Connection.com L | | rds of the Florida Department |
|--|--|-------------------------|--|
| 2. The Florida docu | ument/registration number as 3 | ssigned to this limited | liability company is: |
| 3. The date this me | mber/manager withdrew/res | igned or will withdraw | y/resign is: |
| Michael K Sr | Michael K Snow Sr | | |
| (Print N | ame of Person Resigning) | | |
| MGRM | | | |
| | (Print Title) | | |
| of this limited lia resignation in wr | | e limited liability com | pany has been notified of my |
| Signature of Di | ssociating Member or Resig | ning Manager | 2015 SECH |
| _ | \$25.00 (Required) \$30.00 (Optional) | | FILED 2015 SEP 24 P 4: SECRE TARY OF STATELLAHASSEE, FLORI |