# L09000033018

(Requestor's Name)  (Address)	100159534
(City/State/Zip/Phone #)	09/10/090100200
(Business Entity Name)	08/13/0901009
(Document Number)	
Certified Copies Certificates of Status  Special Instructions to Filing Officer:	ALLAHASSEE, FLORIDA
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# **COVER LETTER**

SUBJECT: Music Vision Entertainment, LLC						
Name of Limited Liability Company						
DOCUMENT NUMBER: L09000033018						
The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.						
Please return all correspondence concerning this matter to the following:						
Fawn R. Foreman						
Name of Person						
Music Vision Entertainment, LLC						
Name of Firm/Company						
5450 Bruce B. Downs Blvd., #391						
Address						
Wesley Chapel, FL 33544						
City/State and Zip Code						
frforeman@gmail.com						
E-mail address: (to be used for future annual report notification)						
For further information concerning this matter, please call:						
Fawn R. Foreman at (813) 735-8478  Name of Person Area Code & Daytime Telephone Number						
Name of Person Area Code & Daytime Telephone Number						
Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.						

### MAILING ADDRESS:

Amendment Section Division of Corporations

TO:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

#### STREET ADDRESS:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



August 21, 2009

FAWN R. FOREMAN 1743 FLUORSHIRE DRIVE BRANDON, FL 33511

SUBJECT: MUSIC VISION ENTERTAINMENT, LLC

Ref. Number: L09000033018

We have received your document for MUSIC VISION ENTERTAINMENT, LLC and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The fee to resign as registered agent of an active limited liability company is \$85.00.

There is a balance of \$60.00 due to file the resignation.

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 call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 709A00027908

PRECENTAL EN BEOD SECRETARY OF STATE



August 18, 2009

FAWN R. FOREMAN MUSIC VISION ENTERTAINMENT, LLC 5450 BRUCE R. DOWNS BLVD., #391 WESLEY CHAPEL, FL 33544

SUBJECT: MUSIC VISION ENTERTAINMENT, LLC

Ref. Number: L09000033018

We have received your document for MUSIC VISION ENTERTAINMENT, LLC and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The fee to resign as registered agent of an active limited liability company is \$85.00.

There is a balance of \$60.00 due to file the resignation.

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 call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 709A00027908

143. Fluorshire Drive Lord Brown 33511



# RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 60	7.0502(2)	, 617.0502(	2), 607.1509, or 617.1	509,
Florida Statutes, the undersigned,	Fawn R	Forema	n Registered Agent)	
hereby resigns as Registered Agent for	Music	Vision	- •	, LLC
L09000033018				
(Document Number, if known)	_			
A copy of this resignation was mailed to	the above	listed corp	oration at its last knov	vn address.
The agency is terminated and the office this statement is filed.	discontinu	ed on the 31	st day after the date o	n which
Faun K	· for	2han	9-1-09	
هاد)	mature or Ke	signing Agent	)	
If signing on behalf of an entity:				
(1)	Typed or Pri	nted Name)		
	(Capa	city)		

# Fee for filing this document:

\$87.50 - Active corporation
\$35.00 - Administratively dissolved/voluntarily dissolved/
withdrawn corporation

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