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SECRETARY OF STATE
TALLAHASSFE, FI ORIDA

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: THE BED HILLS MOTION PILTURE RELEASING COMPANY, LLC (Name of Limited Liability Company)
The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
FRANK PATTERSON (Contact Person)
(Common Poison)
(Firm/Company)
2413 OAKDALE ST. (Address)
TALLAHASSEE, F2 32308 (City/State and Zip Code)
For further information concerning this matter, please call:
FRANK PATTERSON at (850) 980-5495 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for: \$25 Filing Fee \$ Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (5/06)

2661 Executive Center Circle

Tallahassee, Florida 32301



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

		y as it appears on the records MOTION PICTURE F	of the Florida Department <u>RELEASING COPIPA</u> WY LL
2. This limited liability FLORIDA		ized under the laws of:	
	nent/registration number 072942	er of this limited liability com	pany is:
4. I, FRANK (Print Nam	PATTERSON ne of Person Resigning)	, hereby resign as a _	Managins & Member (Print Title)
resignation in writi	ng.	n the limited liability compan	y has been notified of my
Filing Fee: Certified Copy:	\$25.00 (Required)	ig ivicinioci di ivianagei	IT FEB 22 AMIII: SECRETARY OF ST TALLAHASSEE, FLO