

L10000089532

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800215049588

01/04/12--01004--012 \*\*55.00

FILED  
12 JAN -4 PM 4:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE  
JAN 06 2012  
EXAMINER

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Pure Passion Adult Entertainment, 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:

Kimberly Timmons

(Contact Person)

Pure Passion Entertainment, LLC

(Firm/Company)

8123 Nebraska Ave.

(Address)

Tampa, Fla 33604

(City/State and Zip Code)

For further information concerning this matter, please call:

Kimberly Timmons

(Name of Contact Person)

at ( 813 ) 391-7787

(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☐ \$25 Filing Fee

☒ \$55 Filing Fee &  
Certified Copy

CK# 2524

**STREET/COURIER ADDRESS:**

Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, Florida 32301

**MAILING ADDRESS:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

FILED  
12 JAN -4 PM 4:02  
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**

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: Pure Passion Adult Entertainment, LLC

2. This limited liability company was organized under the laws of:  
FLORIDA

3. The Florida document/registration number of this limited liability company is:  
L10000089532

4. I, Kimberly Timmons, hereby resign as a M&M  
(Print Name of Person Resigning) (Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Kimberly Timmons  
Signature of Resigning Member, Managing Member or Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)

FILED  
12 JAN -4 PM 4:02  
FLORIDA DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA