L10000120280

| (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



100244496871

02/18/13--01014--018 **25.00

FEB 1 9 2013 T. HAMPTON

COVER LETTER

| · |
|--|
| SUBJECT: iAm Entertainment CROUP, LLC (Name of Limited Liability Company) |
| The enclosed member, managing member or manager resignation and fee(s) are submitted filing. |
| Please return all correspondence concerning this matter to: |
| MAnuel Sujan (Contact Person) |
| iAM ENTERTAINMENT GROUP, LLC (Firm/Company) |
| 11461 Orange St. |
| ORIANDO FL 32836 (City/State and Zip Code) |

For further information concerning this matter, please call:

MANUEL RUJAN
(Name of Contact Person)

at (407), 718-2622
(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
2661 Executive Center Circle
Tallahassee, Florida 32301

TO: Registration Section

Division of Corporations

MAILING ADDRESS:

for

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

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

| | limited liability company a | • • | • | | | Florida De | :partme | ent |
|--|--|----------|------------|-------------|-----------|-------------------------|-----------|---|
| | ility company was organize | :d unde | er the law | vs of: | | | | |
| and the second s | ument/registration number o | of this | limited l | iability co | mpany i | s: | | |
| 4. I, Malgar (Print N | Store Jangley ame of Person Resigning | <u> </u> | , hereby | resign as a | Man | DGC NG (Print Title) | Men | ber |
| resignation in wr | gning Member, Managing I | | | | any has l | been notifi | ed of m | ıy |
| Filing Fee: Certified Copy: | \$25.00 (Required) \$30.00 (Optional) | | | | | | 13 FEB 18 | AKYCZECZANO AKYCZECZANO AKYCZECZANO |
| | | | | | | | AH :: | |