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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
_ (Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
		·
(Do	cument Number)	
Certified Copies Certificates of Status		
Special Instructions to	Filing Officer:	
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EXAMINER



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COVER LETTER

Division of Corporations	•
SUBJECT: The Yellow Elephant (Name of Limited Liabil)	Productions, LC ity Company)
The enclosed member, managing member or manager filing.	r resignation and fee(s) are submitted fe
Please return all correspondence concerning this matt	er to:
Luisana Snegart (Contact Person)	
(Firm/Company)	
1050 Brickell Are #3322 (Address)	
Miami FL 33 [3] (City/State and Zip Code)	
For further information concerning this matter, please	call:
(Name of Contact Person) at (Area	Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florage \$25 Filing Fee	rida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Tallahassee, Florida 32314

CR2E079 (5/06)

Tallahassee, Florida 32301



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: The Yeuow Duphant Productions, UC.
2. This limited liability company was organized under the laws of:
Florida.
3. The Florida document/registration number of this limited liability company is:
LHUUW87 (40
4. I,
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.
Signature of Resigning Member, Managing Member or Manager
Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional)