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D. SCOTT OCT 2 8 2016

## **COVER LETTER**

TO: Registration Section Division of Corporations			
SUBJECT: Phoenix Productions Live	LLC		
	Limited Liability Co	ompany)	-
The enclosed member, resignation or diss	ociation and fee	(s) are submitted for filing.	
Please return all correspondence concerni	ng this matter to	:	
Timothy Ervin, Esq.			
(Contact Person)		<del></del>	
Gallant & Ervin, LLC			
(Firm/Company)		<del></del>	
One Olde North Road, Suite 103			
(Address)		<del></del>	
Chelmsford, MA 01824			
(City/State and Zip Code)			SEC SEC
For further information concerning this m	atter, please call	:	是37
Timothy Ervin	978 at (	256-6041	FILE W 3 34  OCT 26 PM 3 34  ALLAMASSEE, FLORIE
(Name of Contact Person)		le & Daytime Telephone Number)	FLO
Enclosed please find a check made payabl \$\black{1}{25}\$ Filing Fee		Department of State for:  g Fee & Certified Copy	RIDA
STREET/COURIER ADDRESS:		MAILING ADDRESS:	
Registration Section Division of Corporations		Registration Section Division of Corporations	
Clifton Building		P.O. Box 6327	
2661 Executive Center Circle		Tallahassee, Florida 32314	

CR2E079 (2/14)

Tallahassee, Florida 32301



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

(Pursuant to 605.0216, Florida Statutes)

1. The name of the	limited liability company	as it appears on the records of the Flori	da Department
of State is: Pho	enix Productions Live L	LC	·
2. The Florida docu L1600015322	•	r assigned to this limited liability compa	any is:
:.	-	resigned or will withdraw/resign is:	/25/2016 ALL
(Print N	ame of Person Resigning)	, hereby withdraw/resign as a	CT 26 RETARY
	(Print Title) bility company and affirm	the limited liability company has been	PF ST
resignation in wr			34 IDA
Signature of Di	ssociating Member or Re	signing Manager	
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		