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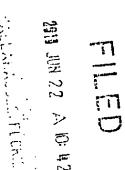
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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: The Music Profits LLC Name of Limited Liability Company	
DOCUMENT NUMBER: <u>L 17000 260 739</u>	
The enclosed Resignation of Registered Agent for a Limited Liability Company and for filing.	fee are submitted
Please return all correspondence concerning this matter to the following:	
Jeremy Derks Name of Person	
The Music Profits LLC Name of Firm/Company	
3674 Parkridge Circle	
Sarasota FL 34243 City/State and Zip Code	FILED 2011 JUN 22 A 10: 112
Jerenuthe film guy @ amail com E-mail hadress: (to be used for future) annual report notification)	FILED
For further information concerning this matter, please call:	0: 42
Teremy Derks at (941) 330 - 4996 Name of Person Area Code Daytime Telephone Num	nber
Enclosed is a check made payable to the Florida Department of State for \$85.00 for a	an active limited

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:

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

STREET ADDRESS:

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

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the prov	risions of section 605.011	15, Florida Statutes, the	undersigned.	
David To	5+C	ent	, hereby resigns as	
	Name of Registered Age	ent		
Registered Agent fo	or The Music	Profits LLC		<u></u>
	Name of Lit	nited Liability Company		_ '
<i>Lj 7000</i> ,250	739 ent Number, if known			
A copy of this resig	nation was mailed to the	above listed limited liab	bility company at its last known addres	is.
The agency is termi	nated and the office disco	ontinued on the 31st day	y after the date on which this statement	t is filed.
	HowTw	Signature of Resigning A	gent	
If signing on behalf	of an entity:			
		Typed or Printed Name		7
		Capacity	22	
	FILING \$ 85.00 \$ 25.00	Active limited liabil	lity company \$\frac{1}{15}\$ ssolved/ voluntarily dissolved/	

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314