L18000011394

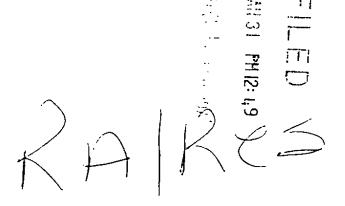
| (| (Requestor's Name) | | | | |
|----------------------|--------------------------|----------|--|--|--|
| (| (Address) | | | | |
| (| (Address) | | | | |
| | (City/State/Zip/Phone #) | <u> </u> | | | |
| PICK-UP | WAIT _ | MAIL | | | |
| | Business Entity Name) | | | | |
| (Document Number) | | | | | |
| Certified Copies | Certificates of Stat | us | | | |
| Special Instructions | to Filing Officer: | | | | |
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COVER LETTER

| TO: Registration Section Division of Corporations | |
|--|---|
| Portico Entertainment, LLC | |
| Name of Limited Liability | Company |
| DOCUMENT NUMBER: L18000011394 | |
| The enclosed Resignation of Registered Agent for a Limited for filing. | Liability Company and fee are submitted |
| Please return all correspondence concerning this matter to the | e following: |
| United States Corporation Agents, Inc. | |
| Name of Person | |
| Legalzoom.com, Inc. | |
| Name of Firm/Company | |
| 9900 Spectrum Dr. | |
| Address | |
| Austin, TX 78717 | |
| City/State and Zip Code | |
| | |
| E-mail address: (to be used for future annual report notification) | |
| For further information concerning this matter, please call: | |
| Kasandra Lund 1 800 | 773-0888 x3951 |
| Name of Person Area Code |) Daytime Telephone Number |
| | |

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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 provisi | ons of section 605.0115. | Florida Statutes, the under | signed. | | |
|--------------------------|---|---|------------------------|------------|---------------|
| United States Corp | ooration Agents, Inc | | hereby resigns as | | |
| Name of Registered Agent | | | nereoy reorgio as | | |
| Registered Agent for _ | Portico Entertainmer | nt, LLC | | | |
| | Name of Limite | rd Liability Company | | | ` |
| L18000011394 | | | | | |
| Document 8 | umber, if known | _ | | | |
| A copy of this resignat | ion was mailed to the abo | ove listed limited liability c | ompany at its last kno | əwn addı | ess. |
| The agency is terminat | | inued on the 31st day after Agnature of Resigning Agent | the date on which thi | | |
| If signing on behalf of | an entity: | | ٠,, | 107 | 3 |
| Cheyenne Moseley | | ·- ·- | | | |
| | Тур | ed or Printed Name | | i- 12 1 | EL E |
| | Asst. Secretary for Uni | ited States Corporation Age | nts, Inc. | | - 1 |
| | | Capacity | | | FILEU |
| | | | | | ويا : |
| | <u>FILING F</u> \$ 85.00 \$ 25.00 | EES: Active limited liability cor Administratively dissolved withdrawn limited liability | V voluntarily dissolv | | |

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