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2005 MAY -2 P 1:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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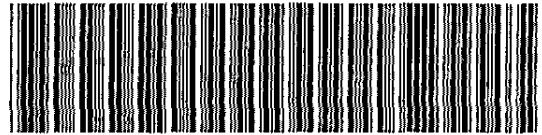
(Business Entity Name)

(Document Number)

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ADDRESSEE
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EMPFÄNGER
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USA

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

ANTIDOTE INTERNATIONAL FILMS, INC.

200 Varick Street
Room 502
New York, New York 10014

PHN 646.486.4344
FAX 646.486.5885
URL www.antidotefilms.com

FILED

2005 MAY -2 P 1:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ANTIDOTE

DATE
FECHA
DATUM
DATE
MM

4/26/2005

REGARDING
CONSIDERANDO
BETREFFEND
CONCERNANT
RE:

County Line Films LLC withdrawal

SENDER
REMITENTE
ABSENDER
EXPEDITEUR
SNA

Takeo Hori

takeo@antidotefilms.com

To Whom It May Concern.

Please find enclosed an Application by Foreign Limited Liability Company for Withdrawal of Authority to Transact Business in Florida for the company named County Line Films, LLC.

Also included is a check for the filing fee of \$25.00. I thank you in advance for your kind handling of this matter.

Sincerely,



Takeo Hori
County Line Films, LLC

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR
WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS IN
FLORIDA

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

County Line Films, LLC
(Name of limited liability company)

New York State
(Jurisdiction of its organization)


This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.

This limited liability company revokes the authority of its registered agent to accept service on its behalf and appoints the Department of State as its agent for service of process based on a cause of action arising during the time it was authorized to transact business in Florida.

c/o Antidote Films, 200 Varick St. #502
(Mailing address)

New York, NY 10014
(City/State/Zip)

The limited liability company agrees to notify the Department of State in the future of any change in its mailing address.


(Signature of member or authorized representative of a member)

Jeffrey Levy-Hinte
(Typed or printed name of signee)

Filing Fee: \$25.00