# M06000005730

(Requ	uestor's Name)	
(Addr	ess)	<u></u>
ndbA)	ress)	
(City/	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Na	me)
(Doce	ument Number)	)
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07/19/13--01027--004 \*\*25.00



JUL 2 2 2013 T. PASSETCH

## **COVER LETTER**

SUBJECT: ICW PRODUCT	IONS LLC			
Name of Limited Lia	bility Company			
DOCUMENT NUMBER: M060	UMBER: M0600005730			
The enclosed Resignation of Registered Agent for a Li for filing.	mited Liability Company and fee are submitted			
Please return all correspondence concerning this matter	to the following:			
Brooke Breeding				
Name of Person				
National Corporate Research, Ltd.				
Name of Firm/Company				
615 S Dupont Hwy	<u></u>			
Address				
Dover, DE 19901				
City/State and Zip Code				
statrep@nationalcorp.com  E-mail address: (to be used for future annual report notifical	ion)			
For further information concerning this matter, please	call:			
Brooke Breeding at ( 80 Area Area	0 ) 483-1140 ext 3005 Code & Daytime Telephone Number			
Enclosed is a check made payable to the Florida Departiability company or \$25.00 for an administratively dislimited liability company.	tment of State for \$85.00 for an active limited solved, voluntarily dissolved or withdrawn			

## **MAILING ADDRESS:**

TO:

Amendment Section Division of Corporations

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

## STREET ADDRESS:

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

# RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ns of section 608.416(2) or 608.509, Florida Statutes, the undersigned,		
Nationa	al Corporate Research, Ltd. , hereby resigns as		
	Name of Registered Agent		
Registered Agent for	ICW PRODUCTIONS LLC		
	Name of Limited Liability Company		,
	0005730		
Document Nu	umber, if known		
	on was mailed to the above listed limited liability company at its last known and and the office discontinued on the 31st day after the date on which this state.		filed.
	Signature of Resigning Agent		
If signing on behalf of a	(\	ដ	IAID S
	Andrew Lundgren	3 JUL 19	Sion
	Typed or Printed Name		- 25 - 25 - 4
	V.P., National Corporate Research, Ltd.		
	Capacity	AH 10: 5	프로
		Ö	泛 25
		57	103 U.S.
			S

FILING FEES:
\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

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

# **COVER LETTER**

SUBJECT:	ICW	PRODUC	TIONS	SLLC		
	ICW Name	e of Limited L	iability C	ompany		<del></del>
DOCUMENT NU	UMBER: M0600005730					
The enclosed Resig for filing.	nation of Registered	Agent for a	Limited I	Liability Com	pany and fee	are submitted
Please return all co	rrespondence concert	ning this mat	ter to the	following:		
	Brooke Breeding Name of Person					
Nationa	l Corporate Resear	rch, Ltd.	<del></del>			
	615 S Dupont Hwy Address					
	Dover, DE 19901 City/State and Zip Code	e				
	rep@nationalcorp.co	-				
	tion concerning this reached by the Breeding ne of Person			483-1140 Daytime Tele	ext 3005 phone Number	<del>-</del>
Enclosed is a check liability company o limited liability cor	made payable to the r \$25.00 for an admin mpany.	Florida Dep nistratively d	artment dissolved,	of State for \$8 voluntarily d	35.00 for an a issolved or w	ctive limited ithdrawn

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