M19000010737

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
[a						
Special Instructions to Filing Officer:						

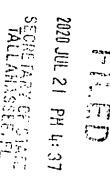
Office Use Only



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D. BRUCE AUG 31 2020

COVER LETTER

TO:		ration Section					
	DIVISIO	on of Corporations					
SUBJI	ECT:	ACTIVATE ENTERTAINMENT	GROUP, LLC				
., 0000		(Name of L	imited Liability Co	ompany)			
The en	iclosed i	nember, resignation or disso	ciation and fee((s) are submitted f	for filing.		
Please	return a	Il correspondence concernin	ig this matter to	:			
DAVIE	CORSO						
	•	(Contact Person)		_			
		(Firm/Company)					
77551 F	EL DUNA	COURT, SUITE F					
		(Address)					
PALM	DESERT	.CA 92211					
		(City/State and Zip Code)		_		2 2	သ
For fur	ther info	ormation concerning this ma	tter, please call	:	֓֞֝֞֝֞֝֞֝֓֓֓֓֞֝֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֡֓֓֓֓֓֡֓֓֡֓֓֡֓֡֓֡֓֓֡֓֓֡		: पार्टेस इ
DAVID	CORSO		415 at (734-0686	SVP	IL 21	الماديدين الماديدين الماديدين
	(Nan	ne of Contact Person)	(Area Code	e & Daytime Telepl	hone Number	r);	. 17
Enclose	ed pleas	e find a check made payable	to the Florida	Department of Sta	ate for: 235	PH 4: 37	
≸ \$25	Filing F	Tec		g Fee & Certified		37	
			ι				

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

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



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 Florida Department		
of State is: ACT	IVATE ENTERTAINMENT G	ROUP, LLC		
2. The Florida doc	ument/registration number	assigned to this limited liability company is:		
M19000010737				
3. The date this me	ember/manager withdrew/r	esigned or will withdraw/resign is: 07/16/2020		
4. I. DAVID CORSO	hereby withdraw/resign as a hereby withdraw/resign as a			
(Print N	Same of Person Resigning)	<u> </u>		
MEMBER				
	(Print Title)			
of this limited lia resignation in wr		the limited liability company has been not interest in the limited by the limited		
David Co	rso			
Signature of D	issociating Member or Res	igning Manager		
Filing Fee:	\$25.00 (Required)			
Certified Copy:	\$30.00 (Optional)			