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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

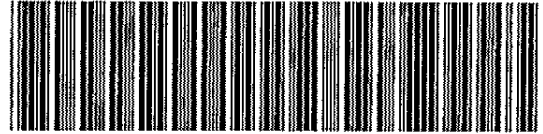
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DIGITAL ARTISTS, LLC  
930 Washington Avenue, 5<sup>th</sup> Floor  
Miami Beach, FL 33139  
305-672-9980  
FAX: 305-672-8720

June 29, 2005

FL Dept of State  
Registration Section  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

Re: Application by Foreign Limited Liability Company for Withdrawal  
of Authority to Transact Business in Florida for Digital Artists, LLC

Gentlemen:

Attached is the completed and signed Application by Foreign Limited  
Liability Company for Withdrawal of Authority to Transact Business in  
Florida for Digital Artists, LLC organized in the State of Delaware.

Further enclosed is our check in the amount of \$25.00 representing  
the filing fee for the Application.

Upon filing of the Application, please send the letter of  
acknowledgment to me, Brad Krassner, at 930 Washington Avenue,  
5<sup>th</sup> Floor, Miami Beach, FL 33139.

Sincerely,

A handwritten signature in black ink, appearing to be 'Brad Krassner', followed by a long horizontal line extending to the right.

Brad Krassner

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

Digital Artists, LLC  
(Name of limited liability company)

DELAWARE  
(Jurisdiction of its organization)

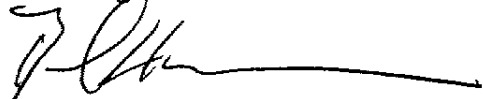
This limited liability company is no longer transacting business in Florida and surrenders its authority to transact business in this state.

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.

930 Washington Ave. 5<sup>th</sup> Floor  
(Mailing address)

Miami Beach, FL 33139  
(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)

Brad Krassner  
(Typed or printed name of signee)

Filing Fee: \$25.00

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