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| (Requestor's Name) (Address) (Address) | 300156445423 |
| (City/State/Zip/Phone #) | 06./04./0901004021 **87.50 |
| Certified Copies Certificates of Status Special Instructions to Filing Officer: | THLED 2009 JUNI - 4 PM 2: 06 SECRE TARY OF STATE TALLAHASSEE, FLORIDA |

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Donald R. Mastropietro 325 Whitfield Avenue Sarasota, FL 34243

June 1, 2009

Florida Department of State Amendment Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

RE: The Motion Picture Group, Inc. Document #: P06000018258

To Whom It May Concern:

As Registered Agent for the corporation (resignation papers filed this date and attached), I previously agreed to let the corporation use my address as its Florida address and my PO Box as its mailing address. Effective with this letter, I am requesting that the Department of Revenue change the addresses as follows:

The Motion Picture Group, Inc. Scott Franklin, President 100 Baker Ct., #37 Island Park, NY 11558

Also effective with this letter, I will have no further involvement with the corporation, nor will I have further communication with the corporation, the Department of Revenue or the Department of State on any matters related to the corporation.

Respectfully submitted Mastrupet

Donald R. Mastropietro

Cc: Scott Franklin, President The Motion Picture Group, Inc.

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COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: The Motion Picture Group, Inc.

(Name of Corporation)

DOCUMENT NUMBER: P06000018258

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Donald R. Mastropietro

(Name of Person)

(Name of Firm/Company)

325 Whitfield Avenue

(Address)

Sarasota, FL 34243

(City/State and Zip Code)

For further information concerning this matter, please call:

Donald R. Mastropietroat (<u>941</u>)914-0763(Name of Person)(Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:

Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509, Donald R. Mastropietro Florida Statutes, the undersigned, __ (Name of Registered Agent) hereby resigns as Registered Agent for _____ The Motion Picture Group, Inc.

(Name of Corporation)

P06000018258

(Document Number, if known)

A copy of this resignation was mailed to the above listed corporation at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

(Signature of Resigning Agent)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

Fee for filing this document:

\$87.50 - Active corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

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