

121000165932

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

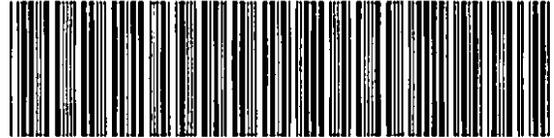
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



600384001356

03/24/22--01014--006 \*\*25.00

SECRETARY OF STATE  
TALLAHASSEE, FL

2022 MAR 24 AM 10:04

FILED

cf 4/10/2022

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Benjamin Media Group LLC  
(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Stewart Gilling  
(Contact Person)

Benjamin Media Group LLC  
(Firm/Company)

PO Box 120333  
(Address)

Fort Lauderdale, FL 33312  
(City/State and Zip Code)

For further information concerning this matter, please call:

Stewart Benjamin Gilling at ( 305 ) 619-4144  
(Name of Contact Person) (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

\$25 Filing Fee

\$55 Filing Fee & Certified Copy

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



FILED

2022 MAR 24 AM 10:04

SECRETARY OF STATE  
TALLAHASSEE, FL

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: Benjamin Media Gap LLC

2. The Florida document/registration number assigned to this limited liability company is:  
L21000165832

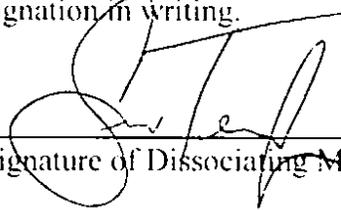
3. The date this member/manager withdrew/resigned or will withdraw/resign is: 3/15/2022

4. I, Shawna Temple, hereby withdraw/resign as a  
*(Print Name of Person Resigning)*

MGR

*(Print Title)*

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

  
\_\_\_\_\_  
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)