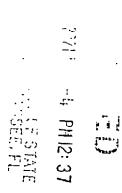
F13000000055

	(Requestor's Name)				
	(Address)				
	(Address)				
	(City/State/Zip/Phone #)				
☐ SICK-1	> MAIL MAIL				
	(Business Entity Name)				
(Document Number)					
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CORPORATION SERVICE COMPANY 1201 Hays Street Tallahassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE: 673240~ AUTHORIZATION : COST LIMIT : ORDER DATE: February 18, 2021 ORDER TIME : 1:13 PM ORDER NO. : 673240-030 CUSTOMER NO: 7892746 FOREIGN FILINGS NAME: THEBLAZE INC. CORPORATE LIMITED PARTNERSHIP LIMITED LIABILITY COMPANY XXXX WITHDRAWAL/CANCELLATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: __ CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF STATUS

EXAMINER:

CONTACT PERSON: Alexxis Weiland - EXT#

APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

Blaze Omnimedia Inc.				
	(Name of Corporation)			
F13000000055				
(Document	Number of Corporation (if known)		
	-12013			
(Incorporated Under Laws of and d	ate authorized to transac	t business/conduct its affa	irs)	
voluntarily surrenders its authority to transact This corporation revokes the authority of its appoints the Department of State as its agent f time it was authorized to transact business or of the following is a current mailing address for	registered agent in for service of process conduct affairs in Flo	Florida to accept serv based on a cause of act	ice on its be ion arising d	half and uring the
6301 Riverside Dr.				
	(Mailing Address)	<u> </u>		
Irving, TX 75039			: 1	
	(City/ State /Zip)	1	PH 12: ((6) "*===J
The corporation agrees to notify the Departme	ent of State in the futu	ire of any change in its	mailingaddi	ress.
		4/c1/zoz	.1	
(Signature of a director, president or other officer - receiver or other court appointed fiduciary, by that	if in the hands of a I fiduciary)	(Date)	ı	
Samuel Tyler Cardon		President		
(Typed or printed name of person signing)		(Title of pers	on signing)	

FILING FEE \$35