

F99000001660

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

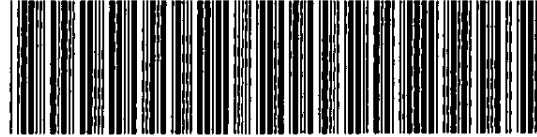
(Business Entity Name)

(Document Number)

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RECEIVED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2016 SEP 23 AM 9:15

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2016 SEP 23 AM 11:03

SEP 26 2016

C LEWIS

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195
REFERENCE : 304658 4813078
AUTHORIZATION : 
COST LIMIT : \$35.00

ORDER DATE : September 22, 2016
ORDER TIME : 8:31 AM
ORDER NO. : 304658-005
CUSTOMER NO: 4813078

FOREIGN FILINGS

NAME: ESPN REGIONAL TELEVISION, INC.

XX 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

CONTACT PERSON: Courtney Williams - EXT# 62935

EXAMINER: _____

2016 SEP 23 AM 9:15

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

ESPN Regional Television, Inc.

(Name of Corporation)

F99000001660

(Document Number of Corporation (if known))

Delaware

(Incorporated Under Laws of)

This corporation is no longer transacting business or conducting affairs within the State of Florida and hereby voluntarily surrenders its authority to transact business or conduct affairs in Florida.

This corporation revokes the authority of its registered agent in Florida 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 or conduct affairs in Florida.

The following is a current mailing address for the corporation:


11001 Rushmore Drive

(Mailing Address)

Charlotte, NC 28227

(City/ State /Zip)

The corporation agrees to notify the Department of State in the future of any change in its mailing address.


(Signature of a director, president or other officer - If in the hands of a receiver or other court appointed fiduciary, by that fiduciary)

09/19/2016

(Date)

Marsha L. Reed

(Typed or printed name of person signing)

Assistant Secretary

(Title of person signing)

FILING FEE \$35