

LO30000015276

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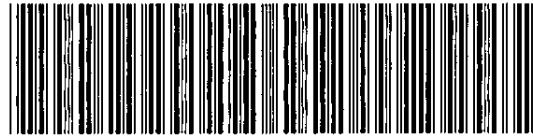
(Business Entity Name)

(Document Number)

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 OCT 13 AM 10:00

M. Culligan OCT 13 2010



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 1, 2010

SPECTOR GADON & ROSE, P.C.
SEVEN PENN CENTER
1635 MARKET STREET, SEVENTH FL
PHILADELPHIA, PA 19103

SUBJECT: WKTM-FLORIDA, LLC
Ref. Number: L03000015276

We have received your document for WKTM-FLORIDA, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

List the Registered Agents name exactly as it appears on DOS records.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan
Regulatory Specialist II

Letter Number: 810A00023334

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: WKTM- FLORIDA, LLC
Name of Limited Liability Company

DOCUMENT NUMBER: L03000015276

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jill Ehrlich, Paralegal
Name of Person

Spector Gadon & Rosen, P.C.
Name of Firm/Company

1635 Market Street, 7th Floor
Address

Philadelphia, PA 19103
City/State and Zip Code

jehrllich@lawsgr.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jill Ehrlich, Paralegal at (215) 241-8833
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

RECEIVED
10 SEP 30 PM 12:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

Spector Gadon & Rosen, LLP

Name of Registered Agent

, hereby resigns as

Registered Agent for WKTM- FLORIDA, LLC

Name of Limited Liability Company

L03000015276

Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company 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:

Jill Ehrlich , Paralegal

Typed or Printed Name

Paralegal

Capacity

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 OCT 13 AM 10:00

FILING FEES:

\$ 85.00	Active limited liability company
\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

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