## L06000083470

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)	_				
(Document Number)					
Certified Copies Certificates of Status	_				
v					
Special Instructions to Filling Officer:	$\neg$				
Special Instructions to Filing Officer:					

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SECRETARY OF STATE
DIVISION OF CORPORATION

N. Culligan OCT - 1 2010

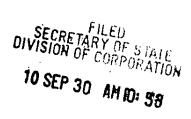
## **COVER LETTER**

TO: Registration So Division of Cor						
SUBJECT:	Meridian M	ledia Group, LLC	,			
Soldeen.		ted Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	emitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
		Andrea Albert				
	*	Name of Person				
	Meridian Media Group, LLC					
		Firm/Company	······································			
	1280 Court St.					
	Address					
Clearwater, FL. 33756						
	City/State and Zip Code					
	aalbert@mmgroup-llc.com  E-mail address: (to be used for future annual report notification)					
			tion)			
For further information of	concerning this matter, please of	eall:				
Da	niel E. Zane	at (_727_) 23	30-9735			
Name o	of Person	Area Code & Daytime T	elephone Number			
Enclosed is a check for t	he following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			

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

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





## FLORIDA DEPARTMENT OF STATE / DIVISION OF CORPORATIONS

## RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

	nited liability company as i lian Media Group, L		of the Florida Department
2. This limited liabilit Florida	y company was organized	under the laws of:	
3. The Florida docum 	ent/registration number of 70	this limited liability con	npany is:
4. I, Gregory G. (Print Nam	Crist e of Person Resigning)	, hereby resign as a	Managing Member (Print Title)
of this limited liabil resignation in writin	ity company and affirm the		ny has been notified of my
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		