Division of Corporations **Electronic Filing Cover Sheet**

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(((H12000150214 3)))



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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : INCORPORATING SERVICES FL

Account Number : I20050000052

Phone : (302) 531-0855

: (850)656-7953

annual report mailings. Enter only one email address please.**	er	the	email	address	for	this	busin	ê 53	entity	to	be	used	for	future
, -	an	nual	repor	t mailin	gs.	Enter	only	one	email	add	res	s ple	ase.	**

LLC REGISTERED AGENT RESIGNATION JAJS MEDIA GROUP LLC

Certificate of Status	0
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Corporate Filing Menu

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JUN - 7 2012

T. HAMPTON

6/6/2012

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COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: JAJS MEDIA GROUP LLC	,
·	ited Liability Company)
DOCUMENT NUMBER: L10000029463	
The enclosed Resignation of Registered Agent f for filing.	for a Limited Liability Company and fee are submitted
Please return all correspondence concerning this	s matter to the following:
EDIE WHITEBREAD	
(Name of Person)	•
INCORPORATING SERVICES, LTD. (Name of Firm/Company)	
3500 S. DUPONT HWY	
(Address)	
DOVER, DE 19901 (City/State and Zip Code)	· · · · · · · · · · · · · · · · · · ·
For further information concerning this matter,	please call:
EDIE WHITEBREAD at (Name of Person)	(302) 531.0855 (Area Code & Daytime Telephone Number)
Enclosed is a check made payable to the Florida liability company or \$25.00 for an administrative limited liability company.	Department of State for \$85.00 for an active limited ely dissolved, voluntarily dissolved or withdrawn
MAILING ADDRESS:	STREET ADDRESS:
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	Clifton Building 2661 Executive Center Circle
Tallahassee, FL 32314	Z601 Executive Center Circle Tallabasses El 32301

(((H12000150214 3)))

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Florid	a Statutes, the undersigned,
INCORPORATING SERVICES, LTD.	, hereby resigns as
(Name of Registered Agent)	
Registered Agent for JAJS MEDIA GROUP LLC	<u> </u>
(Name of Limited Liability Company))
L10000029463	·
(Document Number, If known)	
A copy of this resignation was mailed to the above listed limited list. The agency is terminated and the office discontinued on the 31st de Signature of Resigning	ay after the date on which this statement is filed.
If signing on behalf of an entity:	<u></u> 9
CANDICE B. SWETLAND	SECRET JUN 12 JUN
(Typed or Printed Name)	JA REE
ASSISTANT SECRETARY	- G CAR
(Capacity)	R PROPERTY.
	~ (O
	7:34 T:36
FILING FEES:	- 355 - 355
	vility company

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

withdrawn limited liability company