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(Re	equestor's Name)			
(Ac	idress)	 		
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PICK-UP	WAIT	MAIL.		
(Bu	usiness Entity Nan	ne)		
(Dx	ocument Number)			
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10 OCT -7 PM 3:42

SECRETARY OF STATE
ALLAHASSEE, FIRE

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Paramount Media (Name of Limited	Group UC Liability Company)
The enclosed member, managing member or ma filing.	nager resignation and fee(s) are submitted for
Please return all correspondence concerning this	s matter to:
Vanessa Autrey (Contact Person)	<u> </u>
Paramount Media Gra (Firm/Company)	mp LLC
4800 N Federal Hwy, Sur	
Boca Paton, FL 33431 (City/State and Zip Code)	·
For further information concerning this matter, p	please call:
Vanessa Autrey at (Name of Contact Person)	(888) 394 - 2604 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the \$25 Filing Fee	se Florida Department of State for: \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314
Tallahassee, Florida 32301	

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

_	limited liability company as		s of the Florida Do	epartmen 	ıt
2. This limited liab	ility company was organized	under the laws of:			
3. The Florida docu	ment/registration number of	this limited liability cor	mpany is:		
4. I, <u>Josh Sci</u> Print N	ame of Person Resigning)	, hereby resign as a	Managing 1 (Print Title)	<u>Manb</u>	er_
of this limited liab	oility company and affirm the ting.	e limited liability compa	iny has been notifi	ied of my	1
Signature of Resi	gning Member, Managing M	ember or Manager	TÄLLAHA	10 OCT	ned a lighter
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		SSEE. FLORI	-7 PM 3:4	F