

L14000095976

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

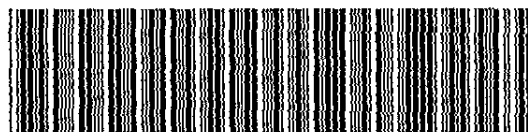
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L14-95976

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M. MILLIGAN  
EXAMINER

DEC 19 2014

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** S & F Media LLC

\_\_\_\_\_  
Name of Limited Liability Company

Dear Sir or Madam:

The enclosed Withdrawal Statement and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Charles Scott

\_\_\_\_\_  
Name of Person

S & F Media LLC and Scott and Fenderson PA

\_\_\_\_\_  
Firm/Company

4755 Central Ave

\_\_\_\_\_  
Address

St.Petersburg, Fl 33713

\_\_\_\_\_  
City/State and Zip Code

itslegal@aol.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Charles Scott

\_\_\_\_\_  
Name of Person

727

at (\_\_\_\_\_)\_\_\_\_\_  
Area Code

321-0099

\_\_\_\_\_  
Daytime Telephone Number

**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

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

### WITHDRAWAL STATEMENT

Pursuant to section 605.0208, Florida Statutes, I hereby submit the following withdrawal statement withdrawing a record before it takes effect:

**FIRST:** The name of the limited liability company is: S & F Media LLC


**SECOND:** The Florida Document number of the limited liability company is: L14000095976

**THIRD:** The record to be withdrawn is: Articles of Conversion, filed  
on June 13, 2014 with an effective date of July 1, 2014, converting Scott and Fenderson  
PA, a Florida Corp, into S & F Media LLC.

**FOURTH:** Please check the appropriate box

☒ This withdrawal statement is signed by all the persons who signed the record being withdrawn.  
or

☐ This record is withdrawn in accordance with the agreement of all the persons who signed the record.

  
Signature of person submitting withdrawal

Charles Scott

Typed or printed name of signature

\_\_\_\_\_  
Signature of person submitting withdrawal

\_\_\_\_\_  
Typed or printed name of signature

\_\_\_\_\_  
Signature of person submitting withdrawal

\_\_\_\_\_  
Typed or printed name of signature

\_\_\_\_\_  
Signature of person submitting withdrawal

\_\_\_\_\_  
Typed or printed name of signature

Filing fee: \$25.00  
Certified Copy: \$30.00 (optional)