# 48000267571

(Requestor's Name)
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### **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT: Digital Outdoor Advertising LLC  Name of Limited Liability	Camana
-	• •
DOCUMENT NUMBER: L18000267571	
The enclosed Resignation of Registered Agent for a Limited for filing.	d Liability Company and fee are submitted
Please return all correspondence concerning this matter to t	he following:
United States Corporation Agents, Inc.	
Name of Person	-
Legalzoom.com, Inc.	
Name of Firm/Company	-
9900 Spectrum Dr.	
Address	-
Austin, TX 78717	
City/State and Zip Code	-
E-mail address: (to be used for future annual report notification)	-
For further information concerning this matter, please call:	
Janna Pantoja 1 800	773-0888 x3950
Name of Person Area Code	Daytime Telephone Number
E-mail address: (to be used for future annual report notification)  For further information concerning this matter, please call:	773-0888 x3950 Daytime Telephone Number

#### MAILING ADDRESS:

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

#### STREET ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provision	ons of section 605.0113	o. Florida Statutes, the under	signed,			
United States Corporation Agents, Inc. , hereby re				ne ne		
				115 (13		
Registered Agent for $\frac{C}{C}$	Digital Outdoor Adv	ertising LLC				· •
<u> </u>	Name of Limi	ited Liability Company			<del>-</del> -	·
L18000267571						
Document N	umber, if known					
A copy of this resignati	on was mailed to the al	bove listed limited liability c	ompany at it	s last ki	nown ac	ldress.
		Signature of Resigning Agent	———	vinen u	ns state	ment is the
If signing on behalf of a	nn entity:					
	Cheyenne Mosel	ey		51.	E-21	
	Ту	ped or Printed Name		<b>4</b> ., :		-mereral
	Asst. Secretary for U	nited States Corporation Age	nts, Inc.	<u> </u>	墨	1
		Capacity		ji vi G	2949 HAY 24	
	<u>FILING I</u> \$ 85.00 \$ 25.00	FEES: Active limited liability cor Administratively dissolved withdrawn limited liability	⊬voluntarily	dissol	> #	

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