L21000274167

(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	e #)
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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: AB Laughlin Media Consulting LLC
Name of Limited Liability Company
DOCUMENT NUMBER: L21000274167
The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.
Please return all correspondence concerning this matter to the 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
raresignations@legalzoom.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (800) 773-0888 Area Code Daytime Telephone Number
Name of Person Area Code Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

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 provis	ions of section 605.0115	. Florida Statutes, the unders	signed,	
United States Corporation Agents, Inc. , hereby resigns as			hereby resigns as	
			neredy resigns as	
Registered Agent for	AB Laughlin Media	Consulting LLC		
	Name of Limit	ed Liability Company		
L21000274167				
Document l	Number, if known	<u></u>		
A copy of this resigna	tion was mailed to the ab	pove listed limited liability c	ompany at its last known address.	
The agency is termina	ted and the office discon	tinued on the 31st day after	the date on which this statement is	filed.
	(Signature of Resigning Agent		•
If signing on behalf of	an entity:			:
	Cheyenne Mosel	ey		•
	Ту	ped or Printed Name	}	
	Asst. Secretary for United States Corporation Agents, In		nts, Inc.	
		Capacity		
	FILING I \$ 85.00 \$ 25.00	FEES: Active limited liability cor Administratively dissolved withdrawn limited liability	npany d/ voluntarily dissolved/	

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