M18000003298

	((Requestor's Name)	· ·
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ALLAHASSEE, FLORID.

CSC - Tallahassee CSC 1201 Hays Street Tallahassee, FL 32301-2607 850-558-1500. Ext:

To: Department Of State, Division Of Corporations

From: Amanda Miller

Ext:

Date: 05/03/24 Order #: 1491869-1 Re: LZ Ad Sales LLC

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Application for Certificate of Agent Resignation

Amount to be deducted-from our State Account: \$85.50 - FL State Account Number: 12000000195

AUTH

Please take the following action:

File in your office on basis Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

SUBJECT: LZ Ad Sales LLC Name of Limited Liability Company DOCUMENT NUMBER: M18000003298 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: RESIGNATIONS DEPARTMENT Name of Person CORPORATION SERVICE COMPANY Name of Firm/Company 251 LITTLE FALLS DRIVE Address WILMINGTON, DE 19808 City/State and Zip Code ANNUALREPORTS@CSCGLOBAL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: RESIGNATION DEPT at (_____)

Area Code | Daytime Telephone Number | Name of Person

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\$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.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

Registration Section Division of Corporations

TO:

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provis	sions of section 605.0	115, Florida Statutes, the unc	dersigned,	
CORPORATION SERVICE COMPANY			hereby resigns as	
	Name of Registered A	gent	Hereby resigns as	
Registered Agent for	LZ Ad Sales LLC			
	Name of L	imited Liability Company	,	
M18000003298				
Document	Number, if known			
A copy of this resigna	ation was mailed to the	e above listed limited liabilit	ty company at its last known address.	
The agency is termina	ated and the office dis		fter the date on which this statement is filed.	
If signing on behalf o	f an entity:			
	BY KYLE TODD		3	
	VICE PRESIDENT	Typed or Printed Name	ENA HA	
		Capacity	THOSE TO	1
	FILIN \$ 85.00 \$ 25.00	G FEES: Active limited liability Administratively dissol withdrawn limited liab	company lved/voluntarily dissolved/oility company	J

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