## P2100011530

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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## **COVER LETTER**

TO:	Amendment Section Division of Corporations	
SUBJI	ECT: One Sun Media Inc.	
	(Name of Corporat	on)
DOCU	UMENT NUMBER: P21000011530	
The er	nclosed Resignation of Registered Agent for a Corpora	ntion and fee are submitted for filing.
Please	return all correspondence concerning this matter to the	ne following:
Unit	ed States Corporation Agents, Inc.	
	(Name of Person)	
Leg	galzoom.com, Inc.	
	(Name of Firm/Company)	
990	00 Spectrum Dr.	
_	(Address)	•
Aus	stin, TX 78717	
	(City/State and Zip Code)	
For fu	rther information concerning this matter, please call:	
	at (800	773-0888 & Daytime Telephone Number)
	(Name of Person) (Area Code	& Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of section	ns 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersioned	United States Corporation Agents, Inc.
	(Mattie of Keglaicica Agent)
hereby resigns as Registered Agent	one Sun Media Inc.
flereby resigns as Registered Agent	(Name of Corporation)
P21000011530	
(Document Number, if known)	<del></del>
A copy of this resignation was mail	ed to the above listed corporation at its last known address.
The agency is terminated and the of this statement is filed.	ffice discontinued on the 31st day after the date on which
	(Signature of Resigning Agent)
	(2) Buarrie of Kezifanuf Wfeart)
If signing on behalf of an entity:	
Cheyenne I	
<del></del>	(Typed or Printed Name)
Asst. Secretary	for United States Corporation Agents, Inc.
<del></del>	(Capacity)

Fee for filing this document: \$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

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