Division of Business Filings



COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

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Michael G. Adams **Kentucky Secretary of State**

Date

Received and Filed: 5/21/2024 2:20 PM Fee Receipt: \$40.00

Division of Business Filings P.O. Box 718 Frankfort, KY 40602 (502) 564-3490 www.sos.ky.gov	Certificate of Withdrawal (Foreign Business Entity)		WFE
Pursuant to the provisions of KR business entity named below and	S 14A - 030 the undersigned applies for a d, for that purpose, submits the following s	certificate of withdraw tatements:	wal on behalf of the
1. The name of the business en	tity is Cable Sports Southeast, LLC (The name must be identical to the name)	ne on record with the	Secretary of State.)
2. The state or country of format	Delaware		
The Secretary of State may for on the Secretary of State and	orward to the business entity at the following commits to notify the Secretary of State of	ng street address any of any future changes	/ process served s to this address:
100 Universal City Plaza	Universal City	CA	91608
Street Address (No Post Office Bo	nsacting business in the Commonwealth a	State nd surrenders its aut	Zip Code
in the Commonwealth or pursua	nt to KRS 14A.9-010(7) the business entity of the Department of Insurance.	y is a foreign insurer	with a certificate of
annointe the Secretary of State:	the authority of its registered agent to access its agent for service of process in any poly to transact business in the Commonweal age in its mailing address.	roceeding based on a	a cause of action ansing
6. This application will be effect	ive upon filing.		
I declare under penalty of perjur	y under the laws of Kentucky that the forgo	oing is true and corre	ect.
Docusigned by: Sheetal Madadi	Sheetal Madadi		May 20, 2024

Printed Name

025 2/24/2022 William Viliam Online

Signature of Authorized Representative