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mmoore WTH

Michael G. Adams Kentucky Secretary of State Received and Filed:

5/3/2023 2:31 PM Fee Receipt: \$40.00



## COMMONWEALTH OF KENTUCKY MICHAEL G. ADAMS, SECRETARY OF STATE

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
business entity named below and	S 14A - 030 the undersigned applies for a c d, for that purpose, submits the following sta		on behalf of the
1. The name of the business en	tity is LD Acquisition Company 12 LLC		
	(The name must be identical to the nam	e on record with the So	ecretary of State.)
2. The state or country of format	ion is $\stackrel{ extbf{DE}}{\longleftarrow}$		
	orward to the business entity at the following I commits to notify the Secretary of State of		
400 Continental Blvd, Ste. 500	El Segundo	CA	90245
Street Address (No Post Office Bo	x Numbers) City	State	Zip Code
in the Commonwealth or pursual from the commissioner of the De 5. The business entity revokes the Secretary of State as its age time it was authorized to transact the future of any change in its materials.	he authority of its registered agent to accept nt for service of process in any proceeding to the business in the Commonwealth. The busin ailing address.	s a foreign insurer wit t service of process or pased on a cause of a	h a certificate of authority  its behalf and appoints ction arising during the
6. This application will be effecti	ve upon filing.		
I declare under penalty of perjury	/ under the laws of Kentucky that the forgoi	ng is true and correct.	
/s/Josef Bobek	Josef Bobek		2/13/2023
Signature of Authorized Represer	tative Printed Name		Date

(07/20)