## L13000125993

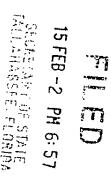
(Re	questor's Name)			
(Address)				
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(Cit	y/State/Zip/Phon	e #)		
PICK-UP	☐ WAIT	MAIL		
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(Document Number)				
Certified Copies	_ Certificate	s of Status		
Special Instructions to	Filing Officer:			





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## **COVER LETTER**

	: Registration Section Division of Corporations						
SUBJEC	CT: Matt Gilman Music LLC						
	(Name o	f Limited L	iability Co	mpany)			
The encl	osed member, resignation or dis	ssociation	and fee(	s) are submitted for f	iling.		
Please re	turn all correspondence concern	ning this n	natter to:	;			
Tony H	auser						
	(Contact Person)			<del></del>			
Matt Gi	lman Music LLC						
<del>,</del>	(Firm/Company)			_	至今	<del>-</del>	
22717 9	Stallion Drive					FEB	•
	(Address)			_	25.52 25.52 25.52	2	
Sorrent	o, FL 32757				면 건 8	FEB -2 PM 6:5	The street that
	(City/State and Zip Code)			_	0215 1174 1174	Ω. Ö	•
For furth	er information concerning this	matter, ple	ease call:	:	***	7	
Tony H	auser	at (_	407	394-4798			
	(Name of Contact Person)		Area Code	) e & Daytime Telephon	e Number)		
	l please find a check made paya iling Fee			Department of State f g Fee & Certified Co			
	Γ/COURIER ADDRESS:			MAILING ADDR	ESS:		
_	tion Section			Registration Section			
	of Corporations	1					
				Tallahassee, Florid	a 32314		

Tallahassee, Florida 32301

CR2E079 (2/14)



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS



## DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

1. The name of the	limited liability company as	it appears on the records of the Florida Department
of State is: Mat	t Gilman Music LLC	·
2. The Florida doc	ument/registration number as	ssigned to this limited liability company is:
L1300012599	3	
3. The date this me	ember/manager withdrew/res	igned or will withdraw/resign is:
lardan Carmianta		
(Print N	'ame of Person Resigning)	, hereby withdraw/resign as a
Secretary		
	(Print Title)	
of this limited lia resignation in wr		ne limited liability company has been notified of my
Signature of D	issociating Member or Resig	ning Manager
Filing Fee:	\$25.00 (Required)	
Certified Copy:	\$30.00 (Optional)	