6/24/2020

Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

from:

Account Name : CYAN CONSULTANTS INC.

Account Number : I20180000074

Phone : (407)346-5731 Fax Number : (407)650-3216

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: contact@cyancinc.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SONIC INVESTMENTS LLC

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| SUBJ | тст∙ | SONIC INVESTMENTS LLC (Name of Limited Liability Company) | | |
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| The er | nclosec | I member, resignation or dissoci | ation and fee(s) | are submitted for filing. |
| Please | e return | all correspondence concerning | this matter to: | |
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| | | (Contact Person) | | |
| SONIC | CINVE | STMENTS LLC | | |
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| KISSI | MMEE. | FL 34743 | | _ |
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| For fo | urther i | nformation concerning this matt | er, please call: | |
| SERC | ilo DU | ARTE | 407 at (| 914-6402 |
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| | Reg Divi P.O | ing Address: istration Section ision of Corporations . Box 6327 ahassee, FL 32314 | | Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 |

CR2E079 (2/14)



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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 of State is: | it appears on the records of the Florida Department |
|--|--|
| 2. The Florida document/registration number as | ssigned to this limited liability company is: |
| 3. The date this member/manager withdrew/res | igned or will withdraw/resign is: |
| 4. I. (Print Name of Person Resigning) | |
| MGR | |
| (Prim Title) of this limited liability company and affirm the resignation in writing. | ne limited liability company has been notified of my |
| Signature of Dissociating Member or Resignature | gning Manager |
| Filing Fee: \$25.00 (Required) Certified Copy: \$30.00 (Optional) | |