L 200000 38587

(Requestor's Name)

_____

(Address)

_____

(Address)

_____

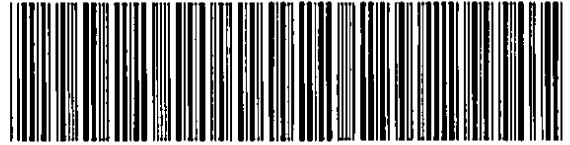(City/State/Zip/Phone #)

☐ PICK-UP   ☐ WAIT   ☐ MAIL

_____

(Business Entity Name)

_____

(Document Number)

Certified Copies _____   Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

||||||||||||||||||||||||||||||||||||||||

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03/27/20--01006--031   **25.00

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O SIMMONS

APR 0 7 2020

COVER LETTER

TO: Registration Section
      Division of Corporations

SUBJECT: Omatum Enterprises LLC
_____
(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Greg Dizzia
_____
(Contact Person)

_____
(Firm Company)

7830 Las Canas Ct.
_____
(Address)

Jacksonville, FL 32256
_____
(City State and Zip Code)

For further information concerning this matter, please call:

Greg Dizzia   315   945-0769
_____ at (_____) _____
(Name of Contact Person)   (Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:
■ $25 Filing Fee   ☐ $55 Filing Fee & Certified Copy

Mailing Address: **Street Address:**
Registration Section   Registration Section
Division of Corporations   Division of Corporations
P.O. Box 6327   The Centre of Tallahassee
Tallahassee, FL 32314   2415 N. Monroe Street, Suite 810
                                   Tallahassee, FL 32303

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: Omatum Enterprises LLC

2. The Florida document/registration number assigned to this limited liability company is:
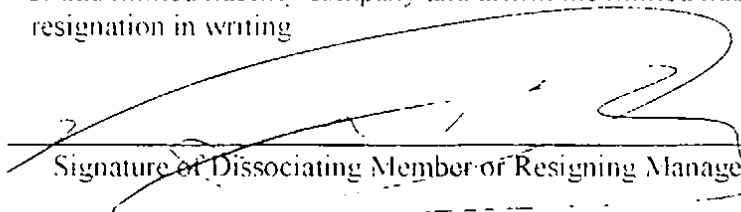
   Omatum Enterprises LLC: L20000038587

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 3/23/2020

4. I, Raymond Fong _____, hereby withdraw/resign as a
   (Print Name of Person Resigning)

   MGR
   _____
   (Print Title)

   of this limited liability company and affirm the limited liability company has been notified of my resignation in writing

   _____
   Signature of Dissociating Member of Resigning Manager

2020 MAR 27 PM 4:19

Filing Fee: $25.00 (Required)
Certified Copy: $30.00 (Optional)

CR2E079 (2-14)