

L20000038587

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

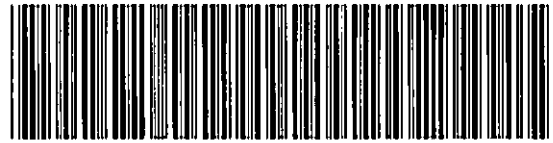
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100340894241

03/27/20--01006--003 \*\*\$25.00

2020 MAR 27 PM 12:28  
FILED  
MAR 27 2020  
MAR 27 2020

O SIMMONS  
APR 08 2020

## COVER LETTER

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ~~Omatum Enterprises LLC~~ 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

(Name of Contact Person)

at ( 315 ) 945-0769  
(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:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303



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)

2020 MAR 27 PM 12:20

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: ~~Omatum Studios LLC~~ Omatum Enterprises LLC

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

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

4. I, Chad Riddersen, 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 or Resigning Manager

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