

FILED
2022 MAR -7 PM 12:00
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: STRIKING SOUND AND LIGHT 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:

COLIN SHERMAN

(Contact Person)

(Firm/Company)

1114 STEVENSON AVENUE

(Address)

CLEARWATER FLORIDA

(City/State and Zip Code)

For further information concerning this matter, please call:

COLIN SHERMAN

at (323) 8300283

(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:

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



FILED
2022 MAR -7 PM 12:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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: STRIKING SOUND AND LIGHT LLC

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

L 21000108092

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

4. I, COLIN JOSEPH SHERMAN, hereby withdraw/resign as a
(Print Name of Person Resigning)

OWNER / MANAGER

(Print Title)

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

[Signature]
Signature of Dissociating Member or Resigning Manager

Company notified
14 October 2021

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