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(Requestor's Name)						
(Address)						
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(City/State/Zip/Phone #)						
PICK-UP	☐ WAIT	MAIL				
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Certified Copies	Certificates of	Status				
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Special Instructions to Filing Officer:						
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FILED ©

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October 1, 2021

Registration Section
Division of Corporations

SUBJECT: B.O.S.S. beautiful omnipotent sonic society

DOC/REGISTRATION #: L21000219490
RE: Mailing Address

To Whom It May Concern,

I have attached the Cover Letter and Dissociation Form along with the required \$25.00 fee. Please be advised this will affect the mailing address for B.O.S.S. as it is currently mine.

Benjamin Brown, who is a current Manager will also be the Registered Agent as per the cover letter all future correspondence should be mailed directly to Ben, at the address listed in Tallahassee, FL none of the addresses on the original LLC are current. All the information listed on the Cover letter for Benjamin is current.

Sincerely,
Molulus holy

COVER LETTER

	-	tration Section on of Corporations			
SUBJEC	Դ Դ ∙	B.O.S.S. beautiful omnipotent sonic society			
SODJEC	. .	(Name of Lir	nited Liability Cor	npany)	
The encl	losed	member, resignation or dissoc	ciation and fee(s	s) are submitted for filing.	
Please re	eturn	all correspondence concerning	this matter to:		
Benjamin	Brow	n			
		(Contact Person)		_	
NOTE: TH	hë add	ress below is the new & correct add	ress to use		
	-	(Firm/Company)		_	
2355 Cent	tervill	e Rd			
		(Address)		_	
Tallahasse	ee, Fl.	32308-9998			
		(City/State and Zip Code)		_	
For furth	er in	formation concerning this mat	ter, please call:		
Benjamin	Brow	n	813 at (863-2122 or 612 - 601-2659	
	(Na	ime of Contact Person)		& Daytime Telephone Number)	
Enclosed ■ \$25 F		ise find a check made payable Fee		Department of State for: 2 Fee & Certified Copy	
		<u>g Address:</u> tration Section		Street Address: Registration Section	

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Tallahassee, FL 32303

Division of Corporations

The Centre of Tallahassee

2415 N. Monroe Street, Suite 810



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)

	e limited liability company as		of the Florida Department
2. The Florida doc L21000219490	cument/registration number as	ssigned to this limited liab	bility company is:
4. I,	Name of Person Resigning)		
resignation in w	Dissociating Member or Resign \$25.00 (Required)		ny has been notified of my SECULOCT 18 MM 9: 49 TALL HASSEL FATE
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