L21000367421

(Re	equestor's Name)	
. (Ac	idress)	
(Ad	idress)	
(Cit	ty/State/Zip/Phone	e #)
PłCK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	J. HORNE	
	JUL 16 2024	1

Office Use Only



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08/25/24--01082--009 **S5.66



COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Shark Cuterie Snack Company, 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:			
Jessica Higginbothan (Contact Person)			
Sharkeuteric Snack Company, LLC			
1931 Waterfurd Estates Drive			
New Smyrna Beach, FL 32168 (City/State and Zip Code)			
For further information concerning this matter, please call:			
(Name of Contact Person) at (407) 37(0-0509) (Area Code & Daytime Telephone Number)			
Enclosed please find a check made payable to the Florida Department of State for: S25 Filing Fee S55 Filing Fee & Certified Copy			
Mailing Address:Street Address:Registration SectionRegistration Section			

Division of Corporations

The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327



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: Sharkcuterie Smick Company, LLC.
2. The Florida document/registration number assigned to this limited liability company is:
L210003107421
3. The date this member/manager withdrew/resigned or will withdraw/resign is: <u>June 1, 20</u>
4. I. Bubert Wallis Higginbotham, hereby withdraw/resign as a (Print Name of Person Resigning)
AMBR (Print Title)
of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.
Ph (///these
Signature of Dissociating Member or Resigning Manager

\$25.00 (Required)

\$30.00 (Optional)

Filing Fee:

Certified Copy: