

PI0000061489

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

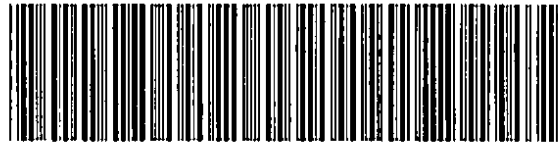
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SECRETARY OF STATE
TALLAHASSEE, FL

Off/Dir
Resign.

1/12/19

Dc

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Sights and Sounds Co. of N. Fl. Inc
(Name of Corporation)

DOCUMENT NUMBER: P10000061489

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jonathan Sheppard

(Name of Person)

The Sights And Sounds Co. of N. Fl. Inc

(Name of Firm/Company)

4427 Production Court

(Address)

Tallahassee FL 32310

(City/State and Zip Code)

For further information concerning this matter, please call:

Jonathan Sheppard at (850) 9263474

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:

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

Street Address:

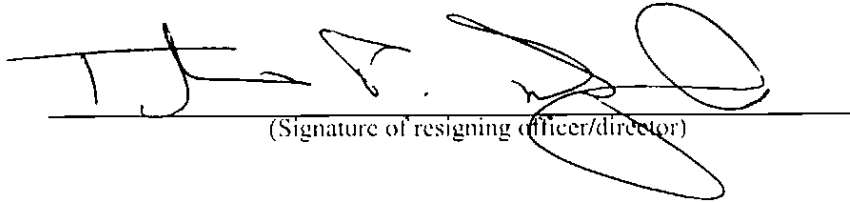
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, Thomas P. Doyle, hereby resign as Vice President
(Title)

of THE SIGHTS AND SOUNDS COMPANY OF NORTH FLORIDA INC.
(Name of Corporation)

P10000061489, a corporation organized under the laws of the State of
(Document Number, if known)
Florida


(Signature of resigning officer/director)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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TALLAHASSEE, FL