

A27657

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

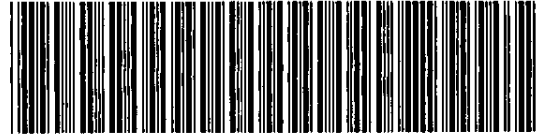
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. SCOTT

MAR 8 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

February 23, 2017

SHELDON ZIPKIN
2020 NE 163 ST #300
NORTH MIAMI BEACH, FL 33162

SUBJECT: BODWIN, LTD.
Ref. Number: A27657

We have received your document for BODWIN, LTD. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a FL CORPORATION, but your entity is a FL LIMITED PARTNERSHIP. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott
Regulatory Specialist II

Letter Number: 517A00003573

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17 MAR -7 PM 2:04
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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BORWIN, LTD
Name of Limited Partnership or Limited Liability Limited Partnership

DOCUMENT NUMBER: A 27657

The enclosed Resignation of Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Sheldon Zipkin, Esq
Contact Person

Law Offices of Sheldon Zipkin, PA
Firm/Company

2020 NE 163 St, Suite 300
Address

North Miami Beach FL 33162
City, State and Zip Code

SheldonZipkin@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Sheldon Zipkin at (305) 944-9100
Name of Contact Person Area Code and Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for:

\$87.50 Filing Fee

\$140.00 (\$87.50 Filing Fee and \$52.50 Certified Copy Fee)

STREET ADDRESS:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

already paid

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

17 MAR -7 PM 2:04

FILED

**RESIGNATION OF REGISTERED AGENT
FOR
LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP**

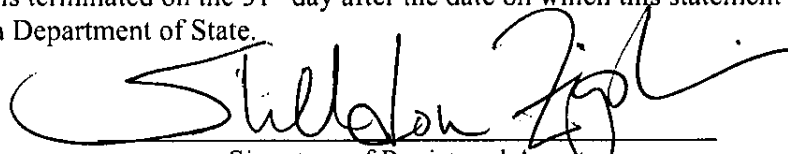
Pursuant to the provisions of section 620.1116, Florida Statutes, the undersigned,

Sheldon Zipkin, hereby resigns as
Name of Registered Agent

Registered Agent for Bodwin, LTD,
Name of Limited Partnership or Limited Liability Limited Partnership

A27657
Florida Document Number, if known

The agent is terminated on the 31st day after the date on which this statement is filed by the Florida Department of State.


Signature of Registered Agent

If signing on behalf of an entity:

Typed or Printed Name

Capacity

Filing Fee: \$87.50
Certified Copy (optional): \$52.50

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA