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MINAL TO P # 37

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## **COVER LETTER**

Division of	Corporations		
	golf Ventures, LLC		
SUBJECT:	(Name of Fo	reign Limited Liability (	Company)
	(**************************************		
Dear Sir or Madam:			
The enclosed withdr	awal and fee(s) are submitte	ed for filing.	
Please return all corr	respondence concerning this	matter to the following:	
Jeff Bennett			
	(Name of Person)		
Glowgolf			
	(Firm/Company)		
8558 W 21st S	t.; Suite 400		
	(Address)		
Wichita, KS 67	205		
	(City/State and Zip Coo	ie)	
For further informati	on concerning this matter, p	olease call:	
Jeff Bennett		316 at (	648-2003
(N	ame of Person)		Daytime Telephone Number)
STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301  MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 3231		ration Section on of Corporations ox 6327	
Enclosed is a check	for the following amount:		
\$25 Filing Fee	□ \$30 Filing Fee & Certificate of Status	□ \$55 Filing Fee & Certified Copy	□ \$60 Filing Fee, Certificate of Status & Certified Copy

## NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

Glowgolf Ventures, LLC
(Name of limited liability company)
Wichita, KS
(Jurisdiction of its organization)
December 08, 2014
(Date registered with Florida Department of State)
M1400008961
(Florida Document Number)
This limited liability company is withdrawing its certificate of authority in this state.
Signature of authorized representative)  Jeff Bendett
(Typed or printed name of signee)

Filing Fee: \$25.00