## 13000005278

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## **COVER LETTER**

TO:	FO: Amendment Section Division of Corporations		
SUBJ	GWNE, INC.		
3009	ECT.	(Name of Corporation)	
DOCI	UMENT NUMBER:	•	
The er	nclosed withdrawal application an	nd fee are submitted for filing.	
Please	return all correspondence concerni	ing this matter to the following:	
	RON RANGEL		
		(Name of Person)	
	WORLDWIDE GOLF SHOPS LLC		
		(Firm/Company)	
	1430 VILLAGE WAY SUITE J		
		(Address)	
	SANTA ANA CA 92705		
		(City/State and Zip code)	
For fur	ther information concerning this m	atter, please call:	
RON R	ANGEL	at ( ) 543-8284 EXT 155	
	(Name of Person)	at (714 ) 543-8284 EXT 155  (Area Code & Daytime Telephone Number)	
Enclos	ed is a check for the amount:		
□ \$35	Filing Fee Status  Certificate of Status	\$\Bigcup \bigsquare \text{\$43.75 Filing Fee & }\Bigcup \text{\$52.50 Filing Fee,} \\ \text{Certified Copy}  \text{Certificate of Status & Certified }\\ \text{(Additional copy is Enclosed)} \end{array}	
	Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

## APPLICATION BY FOREIGN CORPORATION FOR WITHDRAWAL OF AUTHORITY TO TRANSACT BUSINESS OR CONDUCT AFFAIRS IN FLORIDA

GWNE, INC.

(Name of Corporatio	n)
F13000005278 121091213 (Document Number of Corporation	on (if known)
	on (ii allown)
(Incorporated Under Laws of and date authorized to tran	sact business/conduct its affairs)
corporation is no longer transacting business or conducting tarily surrenders its authority to transact business or conductorporation revokes the authority of its registered agent	ct affairs in Florida.
nts the Department of State as its agent for service of proce was authorized to transact business or conduct affairs in F	ess based on a cause of action arising during th
ollowing is a current mailing address for the corporation:  1430 VILLAGE WAY SUITE J	7021 CO
(Mailing Address)	TCC 22 MI IO: 19 THE HARY SEE STAT
SANTA ANA CA 92705	SSEE OF C
(Čity/ State /Zip)	FELE : 19
rporation agrees to notify the Department of State in the fi	uture of any change in its mailing address.
/1/0 K	1201/2021
	12/21/2021
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)	(Date)
(Signature of a director, president or other officer - if in the hands of a receiver or other court appointed fiduciary, by that fiduciary)  AL MORRIS	

**FILING FEE \$35**