F1900000 3156

(Requ	iestor's Name)	
(Addr	ess)	
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PICK-UP	WAIT	MAIL
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(Docu	ıment Number)	
Certified Copies	Certificates	s of Status
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2019 SEP 23 AHTH: 19





September 11, 2019

WILLIAM T PRESTON 605 S ORANGE ST NEW SMYRNA BEACH, FL 32168

SUBJECT: COWEN LAND COMPANY

Ref. Number: F19000003156

We have received your document for COWEN LAND COMPANY and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of Correction must be filed within 30 days of the date that the original document was filed.

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

TO UPDATE THE REGISERED AGENT YOU WILL NEED TO FILE STATEMENT OF CHANGE OOF REGISTERED AGENT FORM ALONG WITH AN ADDITIONAL 35.00 DOLLAR CHECK OR MONEY ORDER.

A certificate or a document of similar import evidencing the amendment must be submitted with the application. The certificate should be authenticated as of a date not more than 90 days prior to delivery of the application to the Department of State by the Secretary of State or other official having custody of the records in the jurisdiction under the laws of which it is incorporated, formed, or organized. Attached to a certificate, under oath or affirmation of the translator, must be attached to a certificate which is not in English.

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

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Catherine M Wood Regulatory Specialist II

www.sunbiz.org

Letter Number: 119A00018727

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: COEN LAND COMPANY Name of Corporation		
DOCUMENT NUMBER: F1700003156		
The enclosed Statement of Change of Registered Office/Agent and	nd fee are submitted for filing.	
Please return all correspondence concerning this matter to the fo	llowing:	
WILLIAM T. PRESTON, ES Name of Contact Person	On The second se	
THE PRESTON LAW FIRM/Company	1	
605 S. OCAUGE STRE	FT	
NEW SMYONA BEACH F-L 32168 City/State and Zip/Code		
E-mail address: (to be used for future annual report notification)		
For further information concerning this matter, please call:		
Wicciam T. Paes row at (386) 424-9200 ea Code & Daytime Telephone Number	
Enclosed is a \$35.00 check made payable to the Department of S	State.	
Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	

TO:

' STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of in order to change its registered office or registered agent, or both, in the State of Florida.
1. The name of the corporation: Lowar Laws Company
2. The principal office address: 2603 QUEEN PACK DRIVE,
EDIEWATER, FL 32141
3. The mailing address (if different):
4. Date of incorporation/qualification: 07-05-7513 Document number: 49 000063156
5. The name and street address of the current registered agent and registered office on file with the Florida Department of State: (If resigned, enter resigned)
WAYNER, WOWAN
EDCENTIER, FL 32141
EDCEWATER, FL 32141
6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):
WHYNE COWAN
2603 QUEEN PALM DEIVE P.O. Box NOT acceptable
EUGEWATER FL 32141
The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.
Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.
Manage of an officer or director Wayne of an officer or director United or typed name and title
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address. I hereby confirm that the corporation has been notified in writing of this change.
Mane 9/18/2019 Signature of Registered Agent Wate
Signature of Registered Agent
If signing on behalf of an entity:
Wayne Coulan Typed or Printed Name
* * * FILING FEE: \$35.00 * * *

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

CR2E045 (03/12)