

# **2010 LIMITED LIABILITY COMPANY REINSTATEMENT**

DOCUMENT# L09000041840

**Entity Name:** BOWEN ASSOCIATES, LLC

**FILED**  
**Oct 29, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

4102 ORTEGA FOREST DRIVE  
JACKSONVILLE, FL 32210

**New Principal Place of Business:**

**Current Mailing Address:**

4102 ORTEGA FOREST DRIVE  
JACKSONVILLE, FL 32210

**New Mailing Address:**

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DUSS, ROBERT V  
1050 RIVERSIDE AVE.  
JACKSONVILLE, FL 32204 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: ROBERT V DUSS

Electronic Signature of Registered Agent

Date

**MANAGING MEMBERS/MANAGERS:**

Title: PST  
Name: BOWEN, FREDERICK H  
Address: 4102 ORTEGA FOREST DRIVE  
City-St-Zip: JACKSONVILLE, FL 32210

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: FREDERICK HARDY BOWEN

PST

10/29/2010

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date