L09000058632

(Do	equestor's Name)	
(Re	questors Name)	
(Ád	ldress)	
•		
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
(3.	,	,
PICK-UP	WAIT	MAIL
(D.,	siness Entity Nar	
udj	isiness Entity Nar	nej
(Do	cument Number)	•• •
Certified Copies	Certificates	s of Status
0	F	
Special Instructions to	Filing Officer:	
٠,		
		ł





000163121340

000163121340 12/02/09--01011--010 **25.00



C. LEWIS

DEC 4 2009

EXAMINER

COVER LETTER

CR2E079 (5/06)

TO: Registration Section Division of Corporation	ons
SUBJECT: BYOW	(Name of Limited Liability Company)
The enclosed member, mana filing.	ging member or manager resignation and fee(s) are submitted for
Please return all corresponde	nce concerning this matter to:
Rimberly Gontact	MOYYISOY) Person)
Brown Owl	Designs ompany)
2530 Elbon	Road
Orange Park (City/State a	1, FL 32073 nd Zip Code)
For further information conce	erning this matter, please call:
Name of Contact Po	erson) at (904) 864-1507 (Area Code & Daytime Telephone Number)
Enclosed please find a check \$25 Filing	made payable to the Florida Department of State for: Fee \$\int_\$55 Filing Fee & Certified Copy
STREET/COURIER ADDI Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301	Registration Section Division of Corporations P.O. Box 6327



FILED

2009 DEC - 2 PM # 47

SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

1. The name of the limited liability company as it appears on the records of the Florida Department
of State is: Byown Owl Designs, LLC.
2. This limited liability company was organized under the laws of:
3. The Florida document/registration number of this limited liability company is:
4. I, Am Cay Son, hereby resign as a MMUMA Member (Rena Title)
of this limited liability company and affirm the limited liability company has been notified of my
resignation in writing.
Signature of Resigning Member, Managing Member of Manager
Filing Fee: \$25.00 (Required)

Certified Copy:

\$30.00 (Optional)