

## Florida Department of State

Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : DAVIS, SCHNITKER, REEVES &amp; BROWNING, P.A.

Account Number : I19980000057

Phone : (850)973-4186

Fax Number : (850)973-8564

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

## BTS TOWING &amp; DIESEL REPAIR, LLC

Certificate of Status	0
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M. SOLOMON

APR 15 2024

Electronic Filing Menu

Corporate Filing Menu

Help

**COVER LETTER**

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**TO:** Registration Section  
Division of Corporations

**SUBJECT:** BTS TOWING & DIESEL REPAIR, LLC  
(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

AUSTIN ODOM

(Contact Person)

BTS TOWING & DIESEL REPAIR, LLC

(Firm/Company)

130 NE COTTONWOOD ST

(Address)

LEE, FLORIDA 32059

(City/State and Zip Code)

For further information concerning this matter, please call:

AUSTIN ODOM

(Name of Contact Person)

at 850 672-3773  
(Area Code & Daytime Telephone Number)

Enclosed please find a check made payable to the Florida Department of State for:

☒ \$25 Filing Fee

☐ \$55 Filing Fee & Certified Copy

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS

**DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM  
FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY**  
(Pursuant to 605.0216, Florida Statutes)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: BTS TOWING & DIESEL REPAIR, LLC
2. The Florida document/registration number assigned to this limited liability company is:  
L12000020608
3. The date this member/manager withdrew/resigned or will withdraw/resign is:                      date of filing
4. I, Benjamin Bowen, hereby withdraw/resign as a  
(Print Name of Person Resigning)  
Manager  
(Print Title)

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)

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