

L16 000 156 968

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Eddie Bowen gave permission
to change RA on application
6/20/19 DS

Office Use Only



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04/25/19--01018--019 **85.00

FILED
JUN 20 2019
TALLAHASSEE, FLORIDA

FILED
JUN 20 2019
TALLAHASSEE, FLORIDA

FILED

D SCOTT

JUN 20 2019

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Bowen Media, LLC

Name of Limited Liability Company

DOCUMENT NUMBER: 813710860

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Ed Bowen

Name of Person

Bowen Media, LLC

Name of Firm/Company

94 Shirah Street

Address

Destin, FL 32541

City/State and Zip Code

Ed@DestinGOLF.info

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Ed Bowen

Name of Person

at (678) 795-9411

Area Code

Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:

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

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED
JUN 20 A 9:22
TALLAHASSEE, FLORIDA

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

Corporation Service Company

Name of Registered Agent

, hereby resigns as

Registered Agent for Bowen Media, LLC

Name of Limited Liability Company

813710860

Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.

Dundsey A. Eick - Asst. V.P.

Signature of Resigning Agent

If signing on behalf of an entity:

Ed Bowen

Typed or Printed Name

President of Bowen Media, LLC

Capacity

FILING FEES:

\$ 85.00	Active limited liability company
\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

FILED
2010 JUN 20 AM 9:22
TALLAHASSEE, FLORIDA