L19000263643

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COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: BOWMAN Realty Consultants, LC (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:		
Tune Ellen Powell (Contact Person)		
(Firm/Company)		
155 Pivedo DV		
Titustuille FL 32780 (City/State and Zip Code)		
For further information concerning this matter, please call:		
(Name of Contact Person) at (770) 265-1022 (Area Code & Daytime Telephone Number)		
Enclosed please find a check made payable to the Florida Department of State for: \$\sum \\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$\\$		
Multima Additions Street Address:		

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



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 lim	ited liability company as it appears on the records of the Florida Department
of State is: <u>PCW</u>	man Realty Consultants, LLC
2. The Florida docume	nt/registration number assigned to this limited liability company is:
	000263643
	er/manager withdrew/resigned or will withdraw/resign is: $0-1-200$
4. I. June E (Print Name	of Person Resigning), hereby withdraw/resign as a
	1 Title)
of this limited liability resignation in writing	y company and affirm the limited liability company has been notified of my
Signature of Dissoc	ciating Member or Resigning Manager
Filing Fee:	\$25.00 (Required)
•	630.00 (Optional)