

PO9 000069693

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

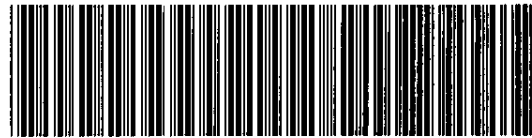
(Business Entity Name)

(Document Number)

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11/1/11

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: BOWEN OUTDOORS, INC
(Name of Corporation)

DOCUMENT NUMBER: PD9000069693

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

GENE WALTERS
(Name of Person)

106 B Pine
(Name of Firm/Company)

106 B PINEHILL DR
(Address)

GULF BREEZE, FL 32561
(City/State and Zip Code)

For further information concerning this matter, please call:

GENE WALTERS at (850) 934-8432
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, GENE WALTERS, hereby resign as TREASURER
(Title)

of BOWGUN OUTDOORS, INC
(Name of Corporation)

P09000069693, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA


(Signature of resigning officer/director)

11 NOV - 1 PM 1992

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314