20000023494

(Re	equestor's Name)	
(Ad	ldress)	
(Address)		
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: BAM ENTERPRISES, INC. (Name of Corporation)
DOCUMENT NUMBER: P2000023494
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Raynell Welson (Name of Person)
(Name of Firm/Company)
41010 P. OKOVA Vd. (Address)
Ta en Co / Fl 3360 (City/State and Zip Code)
For further information concerning this matter, please call:
Rayriell Nelson at (2)3 1070-4202 (Area Code & Daytime Telephone Number)
Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:

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

Street Address:

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

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0503(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, TobiAS UN GFR (Name of Registered Agent)
hereby resigns as Registered Agent for BA4W ENTERPRISES, INC. (Name of Corporation)
P200000 2 3 4 9 4 (Document Number, if known)
A copy of this resignation was mailed to the above listed corporation 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.
Main Mys
(Signature of Resigning Agent) If signing on behalf of an entity:
Tobias Who ER (Typed or Printed Name)
(Capacity)

Fee for filing this document: \$87.50 - Active Corporation

\$35.00 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation

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