721895

(Requestor's Name)
(Address)
(Address)
(Address)
<u></u>
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
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(Dusiness Linky Hame)
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JUN 2 6 2018 S. YOUNG

COVER LETTER

Division of Corporations	
SUBJECT: Sweetwater Oaks Homeowne	ers Association, Inc.
(Name of Corpora	
DOCUMENT NUMBER: 721895	
The enclosed Resignation of Registered Agent for a Corpor	ration and fee are submitted for filing.
Please return all correspondence concerning this matter to	the following:
Cheryl "CJ" Blancett	
(Name of Person)	_
(Name of Firm/Company)	-
P.O. Box 391268	
(Address)	-
Deltona, FL. 32739	
(City/State and Zip Code)	-
For further information concerning this matter, please call:	
CJ Blancett 386	,878-5658
(Name of Person) (Area Cod	e & 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

	07.0502(2), 617.0502(2), 607.1509, or 617.1509,	
Florida Statutes, the undersigned, Che	eryl "CJ" Blancett	
(Name of Registered Agent)		
hereby resigns as Registered Agent for	Sweetwater Oaks Homeowners Association, Inc.	as of 1
noted y testgal as regulatered regulation	(Name of Corporation)	
721895		
(Document Number, if known)		
A copy of this resignation was mailed t	o the above listed corporation at its last known address.	
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the date on which	
	ancett gnature of Resigning Agent)	
If signing on behalf of an entity:	SACI	
Cheryl "CJ" Bl	▽ ~.	11_E
	(Typed or Printed Name)	圣回
Registered Ag	jent / Association Manager	1. tl

Fee for filing this document:

\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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

(Capacity)