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SECRETARY OF STATE

MAY 0 5 2016

C. CARROTHERS

## **COVER LETTER**

TO:	Amendment Section Division of Corporations	
SUBJ	ECT: BOCA CIEGA VILLAGE CONDOMINIUM I	ASSOCIATION INC
	(Name of Corporation	n)
DOCU	UMENT NUMBER: 752559	
The en	nclosed Resignation of Registered Agent for a Corporat	ion and fee are submitted for filing.
Please	return all correspondence concerning this matter to the	following:
RAE	ANN PARKER, RECORDS ADMINISTRATOR	
	(Name of Person) Sentity Management, Inc.	4. 4. 3.
	(Name of Firm/Company)	
	2180 W. State Road 434, Suite 5000	
	(Address)	
	Longwood, FL 32779-5044	
	(City/State and Zip Code)	
For fu	rther information concerning this matter, please call:	
RAE	ANN PARKER at (407) (Name of Person) (Area Code &	788-6700 ext. 44601 & 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

TO:

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 6	07.0502(2), 617.0502(2), 607.1509, or 617.1509,	
Florida Statutes, the undersigned,	SENTRY MANAGEMENT INC (Name of Registered Agent)	
hereby resigns as Registered Agent for	BOCA CIEGA VILLAGE CONDOMINIUM I ASSOCIATION (Name of Corporation)	ATION
752559		
(Document Number, if known)	<del>_</del>	
A copy of this resignation was mailed to	o the above listed corporation at its last known address.	
The agency is terminated and the office this statement is filed.		20 5 HAY
If signing on behalf of an entity:	gnature of Res)gotting Agent)  STRY  STRY	-4 PH 10: 33
Ser	ntry Management, Inc.	ယ ယ
	Typed or Printed Name)	
CH	hief Financial Officer	
	(Capacity)	

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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