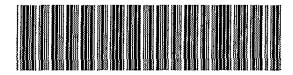
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## management<sub>iks.</sub> 2180 State Road 434 W Ste 5000 Longwood FL 32779-5044 Estates of Pivewood - 14/000 (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) (Document Number) Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_ Special Instructions to Filing Officer:

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## RESIGNATION OF REGISTERED AGENT

Florida Statutes, the undersigned, JAMES W HART JR  (Name of registered agent)  hereby resigns as Registered Agent for ESTATES OF PINEWOOD HOA INC.  (Name of corporation)  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.  (Signature of resigning agent)  (Signature of resigning agent)  SENTRY MANAGEMENT INC  (Typed or Printed Name)	Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
hereby resigns as Registered Agent for ESTATES OF PINEWOOD HOA INC.  (Name of corporation)  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.  (Signature of resigning agent)  (Signature of resigning agent)  SENTRY MANAGEMENT INC  (Typed or Printed Name)	The manual manual and analysis analysis and analysis analysis and analysis analys
(Name of corporation)  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.  (Signature of resigning agent)  (Signature of resigning agent)  SENTRY MANAGEMENT INC  (Typed or Printed Name)	(Name of registered agent)
(Name of corporation)  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.  (Signature of resigning agent)  SENTRY MANAGEMENT INC  (Typed or Printed Name)	Hereby resigns as registered recut for
The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.  (Signatule of resigning agent)  SENTRY MANAGEMENT INC  (Typed or Printed Name)	(Name of corporation)
If signing on behalf of an entity:  SENTRY MANAGEMENT INC  (Typed or Printed Name)  (Signatule of resigning agent)  SENTRY MANAGEMENT INC  (Typed or Printed Name)	
SENTRY MANAGEMENT INC  (Typed or Printed Name)	
	SENTRY MANAGEMENT INC  (Typed or Printed Name)  SENTRY MANAGEMENT INC  (Typed or Printed Name)
PRESIDENT (Capacity)	

## Fee for filing this document:

\$87.50 - Active corporation \$35.00 - Administratively dissolved corporation

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

Division of Corporations

P.O. Box 6327

Tallahassee, FL 32314