## NO2000007583

(1	Requestor's Name)	
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(1	City/State/Zip/Phone #)	
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PICK-UP	☐ WAIT	MAIL
	Business Entity Name)	
,,	Business Entity (441110)	
(1	Document Number)	
Certified Copies	Certificates of	Status
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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Bella Vista at Tivoli V	Woods Homeowners Association, Inc
	(Name of Corporation)
DOCUMENT NUMBER: 7583	
The enclosed Resignation of Registe	ered Agent for a Corporation and fee are submitted for filing.
Please return all correspondence cor	ncerning this matter to the following:
Ryan Pasternak, Red	cords Administrator
(Name of Perso	on)
Sentry Managem	enet, Inc.
(Name of Firm/Cor	npany)
2180 W. State Road 43	34, Suite 5000
(Address)	
Longwood, FI 327	79-5044
(City/State and Zip	Code)
For further information concerning t	his matter, please call:
Ryan Pasternak	at (407) 788-6700 ext. 227 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check made payable to or \$35.00 for an administratively dis	o the Florida Department of State for \$87.50 for an active corporation solved, voluntarily dissolved or withdrawn corporation.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

Pursuant to the provisions of sections 60	07.0502(2), 617.0502(2), 607.1509,	or 617.1509,
Florida Statutes, the undersigned,	James W. Hart, Jr. (Name of Registered Agent	)
hereby resigns as Registered Agent for	,	
NO2000007583		
(Document Number, if known)		
A copy of this resignation was mailed to	the above listed corporation at its la	ast known address.
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after th	e date on which
	gnature of Resigning Agent)	
(31)	gnature of Resigning Agent)	
If signing on behalf of an entity:		
Ser	ntry Management, Inc.	08 SEC TALL
(	Typed or Printed Name)	AI JAN - RETA AHAS
	President	PPROFILE
***************************************	(Capacity)	AM 10: 5

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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