

NOZ000008179

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

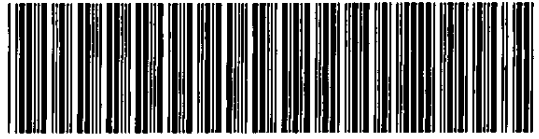
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

cm ✓



200092604212

RA Resign
Teevis

03/16/07--01021--024 **35.00

03/29/07--01002--001 **52.50

FILED
07 MAR 28 AM 11:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA Res.

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: The Cove at Briar Bay Condominium Association, Inc.
(Name of Corporation)

DOCUMENT NUMBER: NO2000008179

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:

Michael J. Gelfand
(Name of Person)

Gelfand + Arpe, P.A.
(Name of Firm/Company)

ISSS Palm Beach Lakes Blvd., Ste 1220
(Address)

West Palm Beach, FL 33401
(City/State and Zip Code)

For further information concerning this matter, please call:

Property
J & L Management, Inc. at (954) 753-7966
(Name of Person) (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED
MAR 26 2007

BY:.....

March 22, 2007

MICHAEL J. GELFAND
GELFAND & ARPE, P.A.
1555 PALM BEACH LAKES BLVD., SUITE 1220
WEST PALM BEACH, FL 33401

SUBJECT: THE COVE AT BRIAR BAY CONDOMINIUM ASSOCIATION, INC.
Ref. Number: N02000008179

We have received your document for THE COVE AT BRIAR BAY CONDOMINIUM ASSOCIATION, INC. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The fee to resign as registered agent of an active corporation is \$87.50.

There is a balance of \$52.50 due to file the resignation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6905.

Thelma Lewis
Document Specialist Supervisor

Letter Number: 107A00019786

RECEIVED
07 MAR 28 AM 8:00
DIVISION OF CORPORATIONS

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, Michael J. Geifand
(Name of Registered Agent)

hereby resigns as Registered Agent for The Cove at Briar Bay Condominium
ASSOCIATION, Inc.
(Name of Corporation)

NO20000008179

(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.

X [Signature]
(Signature of Resigning Agent)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

FILED
07 MAR 28 AM 11:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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