

Florida Department of State

Division of Corporations
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Division of Corporations

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GROUPE NAME . PIEIRONONE INCHES GUDAD A

Account Name : FIELDSTONE LESTER SHEAR & DENBERG Account Number : I19990000180 Phone : (305)357-5775

Phone : (305)357-5775
Fax Number : (305)357-5534

07 JUL 30 AM 9: 59
SECRETARY OF STATE
ALLAHASSEE, FLORIDA

REGISTERED AGENT RESIGNATION

PARK VIEW AT PALM BEACH CONDOMINIUM ASSOCIATION, INC

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Estimated Charge	\$140.00	\$52.50

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RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Florida Statutes, the undersigned, David Shear (Name of Registered Agent) hereby resigns as Registered Agent for Park View at Palm Beach Condominium Association (Name of Corporation) N05000011335 (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. (Signature of Resigning Agent)	suant to the provision	of sections 6	07.0502(2), 617.0502(2), 607.1509, or 617.1509,	•	
hereby resigns as Registered Agent for Park View at Palm Beach Condominium Association (Name of Corporation) N05000011335 (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.	rida Statutes, the unde	signed. Da	avid Shear		
N05000011335 (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.					
(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.	cby resigns as Registe	ed Agent for	Park View at Palm Beach Condominium Associa	J .	
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.	05000011335				
The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.	(Document Number,	known)	 .		
this statement is filed.	copy of this resignation	was mailed t	o the above listed corporation at its last known address.	,	
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			Blancia of transmis results		
If signing on behalf of an entity:	igning on behalf of ar	entity:			
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O7 JUL 30 SECRETARY ALLAHASSE			(Typed or Printed Name)	CRETAR LAHASS	: :
Capacity) AND (Capacity) (Capacity)			(Capacity)	AH 9: 0F ST	AND

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:
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P.O. Box 6327
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