107000001218

		ł
(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



700214351887

11/21/11--01005--030 **87.50

11 NOV 21 PM 2: 15

SECRETARY OF STATE DIVISION OF CORPORATIONS

RES



COVER LETTER

SUBJECT: Tuscany at Westside H	(Name of Corporation)
DOCUMENT NUMBER: N070000	
The enclosed Resignation of Registered	d Agent for a Corporation and fee are submitted for filing
Please return all correspondence conce	rning this matter to the following:
Theresa Sutherland	•
(Name of Person)	
Sutherland Management, Inc.	
(Name of Firm/Compa	any)
107 N. Line Drive	
(Address)	
Apopka, Florida 32703	
(City/State and Zip Co	ode)
For further information concerning this	s matter, please call:
Theresa Sutherland	at (407) 774-7262 x102
(Name of Person)	at (407) 774-7262 x102 (Area Code & Daytime Telephone Number)

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	9,	
Florida Statutes, the undersigned, The	eresa Sutherland		
	(Name of Registered Agent)		
hereby resigns as Registered Agent for	Tuscany at Westside HOA, Inc.		
noted y realist as realistated regard for	(Name of Corporation)	,	
N07000001218			
(Document Number, if known)	_		
A copy of this resignation was mailed to	o the above listed corporation at its last known a	ıddress.	
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the date on w	hich	
	gnature of Resigning Agent)		
f signing on behalf of an entity:			
Theresa Sutherlar	nd		
	Typed or Printed Name)		0
		=	Į.
President		11 NOV 21	DIVISION OF CORPO
	(Capacity)	2	OF C
		<u>~</u>	ÖR.
		-E	504

\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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

Fee for filing this document: