N14 0000 11735

(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:	





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09/11/19--01009--030 **87.50

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: MC PHASE 1 60 LOTS ASSOCIATION, INC. (Name of Corporation), INC.
DOCUMENT NUMBER: N140000 11735
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:
JACK HANSON (Name of Person)
(Name of Person) THE MELLOSE MANAGEMENT PARTNER SHIP. LLC (Name of Firm/Company)
1600 W. COLONIAL DR.
(Address) ORLANDO FL 32804 (City/State and Zip Code)
For further information concerning this matter, please call: ACK HANSON at (407) 228-4/8/ (Name of Person) at (407) 228-4/8/ (Area Code & Daytime Telephone Number)
Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active company.

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections $607.0502(2)$, $617.0502(2)$, 60°	7.1509, or 617.1509,
Florida Statutes, the undersigned, TACK HANSON (Name of Register	red Agent)
hereby resigns as Registered Agent for MC PHASE 1 (Name of Corpo	60 LOTS ASSOCIATION
N14000011735 (Document Number, if known)	
A copy of this resignation was mailed to the above listed corporation. The agency is terminated and the office discontinued on the 31st day this statement is filed.	
The state media	-
(Signature of Resigning Agent)	2019 SEP
If signing on behalf of an entity: TACK HANSON	
(Typed or Printed Name)	? :-J
PRBIDENT	2: 08
(Capacity)	

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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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