lorida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000019575 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6380

From:

Account Name

: GONZALEZ & WERMUTH, P.L.

Account Number : I20020000138 Phone

: (305)715-7157

Fax Number

: (305)715-8982

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

REGISTERED AGENT RESIGNATION BEACON AT 97TH AVENUE ASSOCIATION, INC.

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$87,50

Electronic Filing Menu

Corporate Filing Menu

Help

H11000019575 3

COVER LETTER

	endment Section
ייוע	ision of Corporations
SUBJECT:	Beacon at 97th Avenue Association, Inc.
	(Name of Corporation)
DOCUME	NT NUMBER: N96000004335
The enclose	ed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please return	n all correspondence concerning this matter to the following:
Jacquelin	e Lage
	(Name of Person)
Gonzalez	& Wermuth, PL
	(Name of Firm/Company)
8750 NW	36 Street, Suite 425
· · · · · · · · · · · · · · · · · · ·	(Address)
Doral, Flo	rida 33178
	(City/State and Zip Code)
For further in	nformation concerning this matter, please call:
Jacqueline	(Name of Person) at (305) 591-8844 (Area Code & Daytime Telephone Number)
	(and and an any mine a supplied of this or of

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

2,0 1...

 $\alpha_{12}\alpha_{1}$

H110000195753

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION Pursuage to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,	
Pursuage to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509, Florida Statutes, the undersigned, Roberto Faith (Name of Registered Agent)	
Florida Statutes, the undersigned, ROBETO Faith (Name of Registered Agent) (Name of Corporation) N96000004335	
(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) If signing on behalf of an entity: Copen fo	

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