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(Re	questor's Name)	
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(Add	dress)	
(City	//State/Zip/Phone	∍ #)
PICK-UP	☐ WAIT	MAIL
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COVER LETTER

SUBJ	ECT: THE PRESERVE AT CRESTWOOD HOA, INC.
	(Name of Corporation)
DOC	UMENT NUMBER: N01000008532
The e	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
JOH	N NEWSOME
	(Name of Person)
WEI	LINGTON MANAGEMENT, INC.
	(Name of Firm/Company)
346	I-B FAIRLANE FARMS RD.
-, ,-	(Address)
WEI	LINGTON, FL 33414
	(City/State and Zip Code)
For fu	rther information concerning this matter, please call:
JOH	N NEWSOME at (561) 296-1522
	(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

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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 6	07.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned,JC	OHN NEWSOME
	(Name of Registered Agent)
hereby resigns as Registered Agent for	THE PRESERVE AT CRESTWOOD HOA, INC.
notedy resigns as Registered Agent for	(Name of Corporation)
N01000008532	
(Document Number, if known)	_
	o the above listed corporation at its last known address. discontinued on the 31st day after the date on which
If signing on behalf of an entity:	gnature of Resigning Agent) TALLAHASS
	(Typed or Printed Name) SSEE, FLORIDE
- ,	(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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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