

NO1000002179

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

☐

WAIT

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MAIL

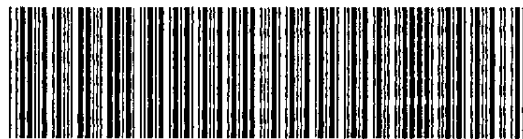
(Business Entity Name)

(Document Number)

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11 MAR 26 PM 12:04
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

APPROVED
3/25/11
T

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Bay Isle at Black Lake Homeowner's Association
(Name of Corporation)

DOCUMENT NUMBER: N01000002179

The enclosed Resignation of Registered Agent for a Corporation and fee are submitted.
Please return all correspondence concerning this matter to the following:

Spencer Solomon

(Name of Person)

Southwest Property Management

(Name of Firm/Company)

PO Box 783367

(Address)

Winter Garden, FL 34778

(City/State and Zip Code)

For further information concerning this matter, please call:

Spencer Solomon

(Name of Person)

at (407) 656-1081
(Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$87.50 for
\$500 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Press:
Amendment Section
Division of Corporations

Center Circle
301

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), 607.1509, or 617.1509,

Florida Statutes, the undersigned, Spencer Solomon

(Name of Registered Agent)

hereby resigns as Registered Agent for Bay Isle at Black Lake Homeowners Association,

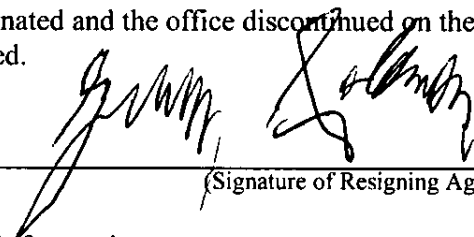
(Name of Corporation)

N01000002179

(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:

(Typed or Printed Name)

(Capacity)

11 MAR 24 PM 12:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

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
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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