

(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:	(Requestor's Name)			
(City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status	(Address)			
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R. WHITE AUG 2 8 2018

## COVER LETTER

Date: 08/31/2018

TO: Amendment Section
Division of Corporations

SUBJECT: FAIRWAY COVE HOMEOWNERS' ASSOCIATION, INC.

(Name of Corporation)

DOCUMENT NUMBER: N25579

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:

BROOKE CHAMNESS

(Name of Person)

Sentry Management, Inc.

(Name of Firm/Company)

2180 W. State Road 434, Suite 5000

(Address)

For further information concerning this matter, please call:

Longwood, FL 32779-5044
(City/State and Zip Code)

BROOKE CHAMNESS at (407) 788-6700 ext. 44602
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

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	<sup>7</sup> .1509.	
Florida Statutes, the undersigned,	SENTRY MANAGEMENT INC (Name of Registered Agent)		
hereby resigns as Registered Agent for	FAIRWAY COVE HOMEOWNERS' ASSOCIATION, INC. (Name of Corporation)		
N25579			
(Document Number, if known)			
A copy of this resignation was mailed to	the above listed corporation at its last known	own address.	
this statement is filed.	discontinued on the 31st day after the date	2018 AUI SECRE	
If signing on behalf of an entity:		(C)(	
Bradley Pomp, or	behalf of, Sentry Management, Inc.	AM 9: 04 SSEE. FL	
-	Typed or Printed Name)	ATE 40	
	President	_	
<del> </del>	(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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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