# 715026

(Requestor's Name)  (Address)
(Address)
(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:

Office Use Only



500385017845

04/15/22--01009--024 \*+87.50

2022 APR 15 PM 5: 42
SECRETARY OF STATE

A. BUTLER
JUL 2 1 2022

#### **COVER LETTER**

TO: Amendment Section Division of Corporations	
Royal Bahamian Association, Inc. SUBJECT:	
(Name of Corporat	ion)
DOCUMENT NUMBER: 715026	
The enclosed Resignation of Registered Agent for a Corpor	ration and fee are submitted for filing.
Please return all correspondence concerning this matter to t	he following:
(Name of Person)	_
Renovations Property Management	
(Name of Firm/Company)	_
1101 NE Miami Gardens Drive	
(Address)	-
Miami, FL 33179	
(City/State and Zip Code)	-
For further information concerning this matter, please call:	
305 at (	949-5286
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

#### **Mailing Address:**

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

#### **Street Address:**

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of secti	ons 607.0503(2), 617.0502(2), 607.1509, or	617.150	)9,	
Florida Statutes, the undersigned,	David D Iglesias			
(Name of Registered Agent)				
hereby resigns as Registered Ager	Royal Bahamian Association, Inc.			
nereny resigns as registered riger	(Name of Corporation)			
715026				
(Document Number, if known)				
A copy of this resignation was ma	iled to the above listed corporation at its las	t known	addre	SS.
The agency is terminated and the this statement is filed.	office discontinued on the 31st day after the	date on	which	
If signing on behalf of an entity:	(Signature of Resigning Agent)	SECRET!	2022 APR 15	career 9 (
David Iglesias	(Typed or Printed Name)	ARY OF STAT	15 PM 5: 42	M
President		Lt	8	

### 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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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
Tailahassee, FL 32314

(Capacity)