## 717063

(Requestor's Name)	
(Address)	_
(Address)	—
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
, ,	
(Document Number)	
(Cooking to the cooking to the cooki	
Certified Copies Certificates of Status	
Certified Copies Certificates of Ctatus	
Special Instructions to Filing Officer:	
,	

Office Use Only



700276429287

10/16/15--01020--026 \*\*87.50

2015 OCT 16 AM 10: 37

'oll for

## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: THREE HORIZONS, NOR	TH, CONDOMINIUM, INC.
(Name of	Corporation)
DOCUMENT NUMBER: 717063	
The enclosed Resignation of Registered Agent for a	Corporation and fee are submitted for filing.
Please return all correspondence concerning this ma	atter to the following:
Russell M. Robbins	
(Name of Person)	
Mirza Basulto & Robbins, LL	.Р
(Name of Firm/Company)	
14160 NW 77th Court, Ste. 2	22
(Address)	
Miami Lakes, FL 33016	
(City/State and Zip Code)	
For further information concerning this matter, plea	se call:
Russell M. Robbins at (A)	722-8900

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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 ÷v -

## 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, Mirza Basulto & Robbins, LLP	
(Name of Registered Agent)	
hereby resigns as Registered Agent for THREE HORIZONS, NORTH, CONDOMINIUM, INC.	
(Name of Corporation)	
717063	
(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.	29
(Signature of Resigning Agent)	976
If signing on behalf of an entity:	All out !
Mirza Basulto & Robbins, LLP  (Typed or Printed Name)	
│	
(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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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