## 726730

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## **COVER LETTER**

TO: Amendment Section Division of Corporations	
·	
SUBJECT: SUN'N GREEN CONDOMINIUM A	SSOCIATION, INC.
	(Name of Corporation)
DOCUMENT NUMBER: 726730	
The enclosed Resignation of Registered &	Agent for a Corporation and fee are submitted for filing.
Please return all correspondence concerni	ing this matter to the following:
Lisa Weathers	
(Name of Person)	
Leland Management, Inc	
(Name of Firm/Company	<b>'</b> )
6972 Lake Gloria Blvd	
(Address)	
Orlando, FL 32809	
(City/State and Zip Code	
For further information concerning this n	atter, please call:  at ( \frac{407}{\text{ Area Code & Davime Telephone Number) \rightarrow \frac{77}{\text{ Area Code & Davime Telephone Number \rightarrow \frac{77}{\text{ Area Code & Davime Telephone \rightarrow \frac{77}{ Area Code \text{ Area Code \text{ Area Cod
Veronica Bross	at ( 407 ) 982-3129
(Name of Person)	(. Hell code to 1919) the Peterphone Pathology
Enclosed is a check made payable to the of \$35.00 for an administratively dissolved	Florida Department of State for \$87.50 for an active corporation of voluntarily dissolved or withdrawn corporation of the state of the
Mailing Address:	Street Address:
Amendment Section	Amendment Section
Division of Corporations	Division of Corporations
P.O. Box 6327	The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 6	607.0503(2), 617.0502(2), 607.1509, or 617.1509.	
Florida Statutes, the undersigned,	Leland Management, Inc.	
<u> </u>	(Name of Registered Agent)	
hereby resigns as Registered Agent for	· ·	
	(Name of Corporation)	
726730		
(Document Number, if known)	<del></del>	
The agency is terminated and the office this statement is filed.  Wherea	discontinued on the 31st day after the date on which  Aur Low grander of Resigning Agent)	
(1	Rebecca Furlow Typed or Printed Name)  President (Capacity)  CARPORED BECCAR  CARPORED BECC	T

## 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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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