

Division of Corporations **Electronic Filing Cover Sheet** 

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To:

Division of Corporations

Fax Number : (850)617-6380

Ata: L. Lincoln

Account Name : COHEN, NORRIS, WOLMER, RAY, TELEPMAN & COHEN

Account Number : I20020000140 Phone : (561)844-3600

Fax Number : (561)842-4104

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\* Email Address: 1KI @ FCohen an Com

> REGISTERED AGENT RESIGNATION DEER CREEK IMPROVEMENT ASSOCIATION, INC.

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(((H13000122389 3)))

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of secti	ions 607.0502(2), 617.0502(2), 607.1509, or 617.1509,		
Florida Statutes, the undersigned,	COHEN, NORRIS, SCHERER, WEINBERGER, WOLMER		
	(Name of Registered Agent)		
hereby resigns as Registered Agen	DEER CREEK IMPROVEMENT ASSOCIATION, INC.		
	(Name of Corporation)	-	
729453			
(Document Number, if known)	<del></del>		
A copy of this resignation was ma	tiled to the above listed corporation at its last known address.		
The agency is terminated and the othis statement is filed.	office discontinued on the 31st day after the date on which		
	(Signaram of esigning Agent)		
If signing on behalf of an entity:			
GREGOR'	Y R. COHEN ≥g	201	
,	(Typed or Printed Name)	- KNF 6102	و ر
PARTNER		9 1	1 # A
	(Capacity)	<b>3</b> 4	.;
	72.1		
	A A A A A A A A A A A A A A A A A A A	<del></del>	
<u>Fee for</u>	filing this document:	F	

Make checks payable to Florida Department of State and mail to:

withdrawn corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/

\$87.50 - Active Corporation

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

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