# 743826

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### **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: Mango Lane Homeowners Association Inc.  (Name of Corporation)	_ <del></del>
•	
DOCUMENT NUMBER: 743826	
The enclosed Resignation of Registered Agent for a Corporation ar	d fee are submitted for filing.
Please return all correspondence concerning this matter to the follo	wing:
Robert E. Paige, Esq.	
(Name of Person)	
Paige Law Group P.A.	
(Name of Firm/Company)	
9500 S. Dadeland Blvd. #550	
(Address)	
Miami, FL 33156	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Alba Martinez 305 670-00 at (	
(Name of Person) (Area Code & Dayt	me 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 617.15	09.	
Florida Statutes, the undersigned.	Robert E. Paige, Esq.		
Tiorida Statutes, the undersigned.	(Name of Registered Agent)		_
haraharaniana na Dagiatanad Ayan	Mango Lane Homeowners Association, Inc.		
hereby resigns as Registered Agent for (Name of Corporation)			_
743826			
(Document Number, if known)			
A copy of this resignation was ma	iled to the above listed corporation at its last known	1 addres	S.
The agency is terminated and the of this statement is filed.	office discontinued on the 31st day after the date on	which	
1/4 9	4	ÄLL,	2022 JUL 18 AH 8: 04
	(Signature of Resigning Agent)		Ξ.
If signing on behalf of an entity:		JELESTE FLORID	3 .
		71 GJ	<u>=</u>
<del></del>	(Typed or Printed Name)		<b>1</b> 0
	(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Fee for filing this document: \$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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