744821

| (Requestor's Name) |
|-----------------------------------------|
| |
| (Address) |
| |
| (Address) |
| |
| (City/State/Zip/Phone #) |
| |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| |
| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer. |
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APR 0 4 2024 D CUSHING Amendment Section Division of Corporations

TO:

COVER LETTER

Date: 03/08/2024

| SUBJECT: THE SOUTHWIND CONDOMINIUM ASSOCIATION INC (Name of Corporation) | |
|---------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| DOCUMENT NUMBER: 744821 | |
| The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing | <u>;</u> . |
| Please return all correspondence concerning this matter to the following: | |
| Darline Mendoza | |
| (Name of Person) | |
| Sentry Management, Inc. | |
| (Name of Firm/Company) | |
| 2180 W. State Road 434, Suite 5000 | |
| (Address) | 2 |
| Longwood, FL 32779-5044 | T I C 2024 MAR 1-2 |
| (City/State and Zip Code) | |
| For further information concerning this matter, please call: | \[\bigsize \bizeta \bi |
| Darline Mendoza, Customer Experience at (407) 788-6700 ext. 28115 (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.

Street Address:
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

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, | SENTRY MANAGEMENT INC |
| _ | (Name of Registered Agent) |
| hereby resigns as Registered Agent for | THE SOUTHWIND CONDOMINIUM ASSOCIATION INC |
| | (Name of Corporation) |
| 744821 | |
| (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 offic this statement is filed. | re discontinued on the 31st day after the date on which |
| \$ | |
| (5 | Signature of Resigning Agent) |
| If signing on behalf of an entity: | |
| Bradley Pomp, o | on behalf of, Sentry Management, Inc. |
| | (Typed or Printed Name) (Typed or Printed Name) |
| | President 22 20 17 |
| | (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