## 751410

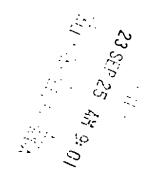
(Requestor's Name)		
(Address)		
(Addiess)		
(Address)		
(City/State/Zip/Phone #)		
(Oity/Otate/21p/1 Hone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
, ,		
(Document Number)		
Certified Copies Certificates of Status		
· —		
Special Instructions to Filing Officer:		
J. HORNE		
OCT 1 4 2023		

Office Use Only



000416181330

09/25/23--01031--014 \*\*87.50



#### **COVER LETTER**

TO: Amendment Se Division of Co	
	ark Property Owner's Association, Inc.
	(Name of Corporation)
DOCUMENT NUMB	ER: 751410
The enclosed Resignat	ion of Registered Agent for a Corporation and fee are submitted for filing.
Please return all corres	spondence concerning this matter to the following:
Robert Kaye, Esquire	
	(Name of Person)
Kaye Bender Rembaum, P.	.L.
(Nai	me of Firm/Company)
1200 Park Central Blvd. So	outh
	(Address)
Pompano Beach, FL 33064	l e e e e e e e e e e e e e e e e e e e
(Cit	y/State and Zip Code)
For further information	n concerning this matter, please call:
Robert Kaye, Esquire	954 928-0680 at ( )
(Name o	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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

#### 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 sections 6	507.0503(2), 617.0502(2), 607.1509, or 617, 1509,
Florida Statutes, the undersigned, Ka	rye Bender Rembaum, P.L.
	(Name of Registered Agent)
hereby resigns as Registered Agent for	Melrose Park Property Owner's Association, Inc.
, , , , , , , , , , , , , , , , , , , ,	(Name of Corporation)
751410	
(Document Number, if known)	<del>_</del>
A copy of this resignation was mailed t	to the above listed corporation at its last known address.
this statement is filed.	e discontinued on the 31st day after the date on which
If signing on behalf of an entity:	
Robert Kaye, Esquire	
	(Typed or Printed Name)
Member	

### 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

(Capacity)