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Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

. (850)617-6380

From:

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

Account Number : I20020000140 Phone : (561)844-3600 : (561)842-4104 Fax Number

er the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email	Address:	
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REGISTERED AGENT RESIGNATION TOWNHOUSE VILLAS SOBRE DEL MAR PROPERTY OWNERS **ASSO**

Certificate of Status	0
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Estimated Charge	\$87.50

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Corporate Filing Menu

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RESIGNATION OF REGISTERED AGENT FOR A CORPORATION (((F)

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509, Florida Statutes, the undersigned, GREGORY COHEN

(Name of Registered Agent)

hereby resigns as Registered Agent for (Name of Corporation)

752324

(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 office discontinued on the 31st day after the date on which this statement is filed.

(Signature of Resigning Agent)

If signing on behalf of an entity:

(Typed or Printed Name)

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withdrawn corporation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
Talinhassee, FL 32314

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