769354

(Re	equestor's Name)	
(Ad	dress)	
	dress)	
(114	u1000)	
(Cit	y/State/Zip/Phone	· #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
(23	ourne, a ridinidely	
0.000	~ 28	(O)
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
, (
1 mills		
	 	

Office Use Only



200418353962

11/06/23--01095--009 **87.50



COVER LETTER

Division of Corporations	
Sweetwater Villas West Condominium Association No. Three, Inc. IBJECT:	
(Name of Corporation)	
OCUMENT NUMBER: 769354	
e enclosed Resignation of Registered Agent for a Corporation and fee are submitted for fi	iling.
ease return all correspondence concerning this matter to the following:	
lichael Bender, Esquire	
(Name of Person)	
ye Bender Rembaum, P.L.	
(Name of Firm/Company)	
00 Park Central Blvd. South	
(Address)	
mpano Beach, FL 33064	
(City/State and Zip Code)	
further information concerning this matter, please call:	
chael Bender, Esquire 954 928-0680 at (
(Name of Person) at ((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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 section	s 607.0503(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned. K	Caye Bender Rembaum
	(Name of Registered Agent)
hereby resigns as Registered Agent f	Sweetwater Villas West Condominium Association No. Three, In
nervoy resigns as registered regent r	(Name of Corporation)
769354	
(Document Number, if known)	
A copy of this resignation was mailed	d to the above listed corporation at its last known address.
The agency is terminated and the off this statement is filed.	(Signature of Resigning Agent)
If signing on behalf of an entity:	(Signature of Resigning Agent) Bender, Esq.
- THE CHACT	(Typed or Printed Name)
	(Typed or Printed Name)
Attorney	<u> +</u>
	(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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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