F22000004690

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FILED 924 APR -9 PM 2: 11 SECRETARY OF STATE

COVER LETTER

TO:	Amendment Section Division of Corporations	
SURI	NHRD Management, Inc. ECT:(Name of C	
DQD3	(Name of C	Corporation)
DOC	UMENT NUMBER: F22000004690	
The e	nclosed Resignation of Registered Agent for a	Corporation and fee are submitted for filing.
Please	e return all correspondence concerning this ma	tter to the following:
Robert	A. Cooper, Esq.	
	(Name of Person)	
Hahn	Loeser & Parks LLP	
	(Name of Firm/Company)	
2400 1	first Street, Suite 300	
	(Address)	
Fort N	lyers, FL 33901	
	(City/State and Zip Code)	
For fu	orther information concerning this matter, pleas	se call:
Robert	Cooper at (239.337.6700
	(Name of Person) (Ai	rea Code & Daytime Telephone Number)
Enclo or \$3.	sed is a check made payable to the Florida Dep 5.00 for an administratively dissolved, voluntar	partment of State for \$87.50 for an active corporationily dissolved or withdrawn corporation.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 Tallahassee, FL 32303

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of section	ons 607.0503(2), 617.0502(2), 607.1509, or 6	17.1509,
Florida Statutes, the undersigned,	Robert A. Cooper	
	(Name of Registered Agent)	Ì
hereby resigns as Registered Agen	it for NHRD Management, Inc.	
	(Name of Corporation)	ł
F.22000004690		}
(Document Number, if known)		
A copy of this resignation was ma	iled to the above listed corporation at its last k	l nown address.
The agency is terminated and the of this statement is filed.	Office discontinued on the 31st day after the de (Signature of Resigning Agent)	te on which
If signing on behalf of an entity:		2024 APR -9
Robert A. Cooper		PR-
-	(Typed or Printed Name)	FILED PR 2:
Registered Agent		· · · · · · · · · · · · · · · · · · ·
	(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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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