J82636

(Requestor's Name)			
(Address)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Business Entry Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



000435078130

08/20/24--01032--004 **2380.00

ALLAHASSEE. FLORID

2024 AUG 20 PM 12: 26

COVER LETTER

TO: Amendment Section Division of Corporations	
V.F. SANCTUARY HILLS, INC.	
(Name of Corpora	tion)
DOCUMENT NUMBER:	
The enclosed Resignation of Registered Agent for a Corpor	ration and fee are submitted for filing.
Please return all correspondence concerning this matter to	he following:
Jeffrey A. Deutch	
(Name of Person)	_
Nelson Mullins Riley & Scarborough LLP	
(Name of Firm/Company)	_
1905 NW Corporate Boulevard, Suite 310	
(Address)	-
Boca Raton, FL 33431	
(City/State and Zip Code)	_
For further information concerning this matter, please call:	
Jeffrey A. Deutch 561	343-6960
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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 th	e provisions of sections 607.0503(2)	i. 617.0302(2), 607.1309, or 6	17.1509,
Florida Statute	es, the undersigned, Jeffrey Deutch		
	-	(Name of Registered Agent)	
hereby resions	as Registered Agent for V.F. SANC	TUARY HILLS, INC.	
nerchy redigin	as registered rigetic for	(Name of Corporation)	
J82636			
(Docum	ent Number, if known)		
A copy of this	resignation was mailed to the above	: listed corporation at its last k	cnown address.
The agency is this statement	terminated and the office discontinuis filed.	ed on the 31st day after the da	ate on which
	My & E	Jull	
	(Signature of Re	esigning Agent)	_4
If signing on b	ehalf of an entity:		2024 A
	Jeffrey Deutch		2024 AUG 20 Secondians Fallahass
	(Typed or Pri	nted Name)	
			<u> </u>
	Purtner		PM 12: 26 OF STATE OF TORIO
	(Capa	city)	_ <u>&</u> •

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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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