

MD00000002290

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

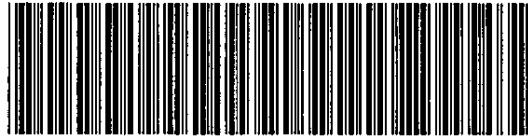
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400270915744

03/27/15--01010--026 **140.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION
15 MAR 27 AM 10:59

C.L.
4-2-15

To: Amendment Section
Division of Corporations

The enclosed Resignation of Registered Agent for several Corporations and fees are submitted for filing. Please return all correspondence concerning this matter to the following:

Mary Cook
WCI Communities, Inc.
24301 Walden Center Drive
Bonita Springs, FL 34134

For further information concerning this matter, please call me at (239) 498-8214.

Thank you.

Mary Cook

**STATEMENT OF RESIGNATION OF REGISTERED AGENT
FOR A LIMITED LIABILITY COMPANY**

Pursuant to the provisions of section 605.0115, Florida Statutes, the undersigned,

Vivien Hastings

, hereby resigns as

Name of Registered Agent

Registered Agent for Communities Finance Company, LLC

Name of Limited Liability Company

M00000002290

Document Number, if known

A copy of this resignation was mailed to the above listed limited liability company 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

Capacity

FILING FEES:

\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/
withdrawn limited liability company

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
15 MAR 27 AM 10:59