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(Address)				
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COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJ	Radio Road Commercial Park Condominium Association, Inc.
	(Name of Corporation)
DOC	JMENT NUMBER: NOODOODOO 106
The e	closed Resignation of Registered Agent for a Corporation and fee are submitted for filing
Pleas	return all correspondence concerning this matter to the following:
Antho	ny Erace
	(Name of Person)
AF Li	ons, LLC
	(Name of Firm/Company)
2338	mmokalee Rd. STE 257
	(Address)
Naple	, FL 34110
	(City/State and Zip Code)
For fi	rther information concerning this matter, please call:
Antho	at () 701 - 7873
	(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 the provisions of sections	s 607.0503(2), 617.0502(2), 607.1509, or 6	17.1509,
Florida Statutes, the undersigned, K	ersey Quade Property Mgmt	
Florida Statutes, the undersigned,	(Name of Registered Agent)	
hereby resigns as Registered Agent for	Radio Road Commercial Park Condominium Association, I	nc.
nereby resigns as registered Agent R	(Name of Corporation)	
N00000000106		
(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 offithis statement is filed.	ice discontinued on the 31st day after the d	ate on which
_ Bune (Sichles (Signature of Resigning Agent)	2024 SEP 13
. 0	(Signature of Resigning Agent)	
If signing on behalf of an entity:		<u> </u>
Kersey Qua	(Signature of Resigning Agent) Le Property Mg at Bruce J (Typed or Printed Name) Director (Capacity)	Sickles = ==================================
	Director	
	(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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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