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COVER LETTER

Amendment Section Division of Corporations

TO:

SUBJECT: EA	AGLE RIDGE LAKES II, INC.
(Name of Corporation)	
DOCUMENT NUMBER:	N0000000693
The enclosed Resignation of Register	ered Agent for a Corporation and fee are submitted for filing.
Please return all correspondence cor	ncerning this matter to the following:
Joe Paladino, Records A	Administrator
(Name of Person	on)
Sentry Managem	nent, Inc.
(Name of Firm/Co	mpany)
2180 W. State Road 4	34, Suite 5000
(Address)	
Longwood, FL 327	779-5044
(City/State and Zip	Code)
For further information concerning	this matter, please call:
Joe Paladino (Name of Person)	at (407) 788-6700 ext. 239 (Area Code & Daytime Telephone Number)
Enclosed is a check made payable to or \$35.00 for an administratively dis	o the Florida Department of State for \$87.50 for an active corporation ssolved, voluntarily dissolved or withdrawn corporation.
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassec, FL 32314

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 60	7.0502(2), 617.0502(2), 607.1509, or 617	7.1509,		
Florida Statutes, the undersigned,	James W. Hart, Jr.			
	(Name of Registered Agent)			
hereby resigns as Registered Agent for _	EAGLE RIDGE LAKES II, INC.		,	,
	(Name of Corporation)			
N0000000693				
(Document Number, if known)	_			
A copy of this resignation was mailed to	the above listed corporation at its last known	own add	ress.	
The agency is terminated and the office of this statement is filed.	discontinued on the 31st day after the date	o o o o o o o o o o o o o o o o o o o		
this statement is fried.				77]
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(Sig	nature of Resigning Agent)		垩	
If signing on habelf of an antity			5	
If signing on behalf of an entity:			52	
Sent	try Management, Inc.			
(T	yped or Printed Name)			
	President			
	(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Fee for filing this document: \$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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