N03000003091

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| Certified Copies Certificates of Status | | |
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| Special Instructions to Fi | ling Officer: | |
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Office Use Only



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SECRETARY OF STATE



COVER LETTER

Date: 2/28/2021 TO: Amendment Section Division of Corporations SUBJECT: SOMERSET OCEANFRONT CONDOMINIUM ASSOCIATION, INC. (Name of Corporation) DOCUMENT NUMBER: N03000003091 The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing. Please return all correspondence concerning this matter to the following: RAE ANN PARKER, RECORDS ADMINISTRATOR (Name of Person) Sentry Management, Inc. (Name of Firm/Company) 2180 W. State Road 434, Suite 5000 (Address) Longwood, FL 32779-5044 (City/State and Zip Code) For further information concerning this matter, please call: RAE ANN PARKER

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:

Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(Name of Person)

Mailing Address:
Amendment Section
Division of Corporations
Part Office Pay 6227

Tallahassee, FL 32314

Post Office Box 6327

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

| Pursuant to the provisions of sections 6 | 07.0502(2), 617.0502(2), 607.1509, or 617 | 7.1309, | |
|---|---|---|--|
| Florida Statutes, the undersigned, | SENTRY MANAGEMENT INC | | |
| | (Name of Registered Agent) | | |
| hereby resigns as Registered Agent for | SOMERSET OCEANFRONT CONDOMINIUM ASSOCIATION, INC. | | |
| thereof, realigns as regulared regularies | (Name | e of Corporation) | |
| N03000003091 | | | |
| (Document Number, if known) | | | |
| A copy of this resignation was mailed t | to the above listed corporation at its last known | own address. | |
| this statement is filed. | e discontinued on the 31st day after the date | | |
| If signing on behalf of an entity: | n behalf of, Sentry Management, Inc. | FILE PH 2021 HAR 16 PH SEGRETARYS | |
| | (Typed or Printed Name) | E E CO | |
| | President | PH 2: 46 SSEE, FLE | |
| | (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