103000006488

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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SEURETARY OF STATE
AND A SSEE, FLORIDA

JAN 0 5 2015

T. LEMIEUX

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: East Park Neighborhood 6&7 HOA, Inc.

(Name of Corporation)

DOCUMENT NUMBER: N03000006488

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:

Nancy Baez

DESTRUCTION OF THE PROPERTY OF

(Name of Person)

Leland Management

(Name of Firm/Company)

6972 Lake Gloria Blvd

(Address)

Orlando FL 32809

(City/State and Zip Code)

For further information concerning this matter, please call:

Chery Zook 407 852-5300
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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 Tallahassee, FL 32314

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned, Leland Management Inc. (Name of Registered Agent)	
hereby resigns as Registered Agent for East Park Neighborhood 6&7 HOA, Inc. (Name of Corporation)	
N0300006488	
(Document Number, if known)	
A copy of this resignation was mailed to the above listed corporation 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)	141
If signing on behalf of an entity:	AT PIC FIL DEC 22
Mary Carol Shaver Mary Carol Shaver	FILED PARD FILED
(Typed or Printed Name)	∴
Director of Corporate Administration	: 29

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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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

(Capacity)