N03000006538

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	
(Ci	ty/State/Zip/Phone	e #)
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RULYNDAND JANALANA

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COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJE	ECT: Artisan Club Condominium
	(Name of Corporation) JMENT NUMBER: N0300006538
The en	closed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
Kes	sha Patrick
	(Name of Person)
Lela	and Management
	(Name of Firm/Company)
6972	2 Lake Gloria Blvd. Orlando, FL 32809
	(Address)
Orla	ando, FL 32809
	(City/State and Zip Code)
For fur	rther information concerning this matter, please call:
Kes	Sha Patrick (Name of Person) at (407) 781-1178 (Area Code & Daytime Telephone Number)
	(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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
hereby resigns as Registered Agent for Artisan Club Condominium ASSC 10H 100 (Name of Corporation)
(Name of Corporation)
N0300006538
(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)
If signing on behalf of an entity:
Mary Carol Shaver
(Typed or Printed Name)
Agent (Capacity) FILE
(Capacity)
Fee for filing this document:
Fee for filing this document:

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

withdrawn corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/

\$87.50 - Active Corporation

Tallahassee, FL 32314