# N03000010780

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
<u> </u>
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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09/08/23--01025--027 \*\*87.50

### GALVIN LAW, PL

390 N. Orange Avenue, Suite 2300 Orlando, Florida 32801

#### **COVER LETTER**

TO:	Amendment Section Division of Corporations		
ci ib	LINCOLN MEWS CONDOMINI	UM, INC.	
SOB.	JEC1:	(Name of Corp	oration)
DOC	UMENT NUMBER: N03000010780		
The e	enclosed Resignation of Registered	Agent for a Cor	poration and fee are submitted for filing
Pleas	e return all correspondence concerr	ning this matter	to the following:
ELI D	ADON		
	(Name of Person)		
M&E	3731/1622 CAPITAL, LLC		
	(Name of Firm/Compan	ıy)	<del></del>
17070	COLLINS AVENUE, # 256		
•	(Address)		
SUNN	YY ISLES BEACH, FL 33160		
	(City/State and Zip Cod	le)	<del></del>
For fi	arther information concerning this r	matter, please ca	ill:
ELI D	ADON	305	384-1320 Ode & Daytime Telephone Number)
	(Name of Person)	at (	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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

DATED; SEP. 3, 2023
BY: MALCOLM P. GALVIN III, ESQ.

BALVIN LAW, PL

CR2E046 (12/19)

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of section	s 607.0503(2), 617.0502(2), 607.1509, or 61	7.1509,		
Florida Statutes, the undersigned, G	ALVIN LAW, PL			
	(Name of Registered Agent)			
hereby resigns as Registered Agent for LINCOLN MEWS CONDOMINIUM, INC.				
and the state of t	<del></del>			
N03000010780				
(Document Number, if known)	<del></del> -			
A copy of this resignation was maile	d to the above listed corporation at its last kn	iown address.		
The agency is terminated and the off this statement is filed.	ice discontinued on the 31st day after the dat	e on which		
	1196111			
-	(Signature of Resigning Agent)	-		
If signing on behalf of an entity:	(Signature of Resigning Agent)  MALCOLM P. 64LVIN III  SEP. 3, 2023	ESa,		
GALVIN LAW, PL				
<del> </del>	(Typed or Printed Name)	-		
AUTHORIZED MEM	BER	2023 TALL		
	(Capacity)	2023 SEP -8		
<b>Fee for fi</b> \$87.50 - A \$35.00 - A	(Capacity)  ling this document: Active Corporation Administratively dissolved/voluntarily dissolved/withdrawn corporation	3 PM 12: 20 Y OF STATE SEE, FLORIDA		

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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