## N0350

	(Re	questor's Name)	
	(Add	dress)	
<u> </u>	(Ad	dress)	
	(Cit	y/State/Zip/Phone	e#) · ·
☐ PI	CK-UP	WAIT	MAIL
_			
	/Du	ainasa Entitu Nas	20)
	(Bu	siness Entity Nan	пеј
	(Do	cument Number)	
Certified Copie	s	_ Certificates	s of Status
Special Instru	uctions to	Filing Officer:	!

Office Use Only



000243433370

000243433370 01/14/13--01037--011 \*\*\*87.50

SECRETARY OF STATE THE PROBABILITY OF CHREAT STATE OF CHREAT STATE OF CHREAT STATE OF STATE O

R.A. Res.

JAN 1 5 2013

T. BROWN

## **COVER LETTER**

	(Name of Corporation)
DOCUMENT NUMBER:	N03501
The enclosed Resignation of Register	red Agent for a Corporation and fee are submitted for filing
Please return all correspondence con-	cerning this matter to the following:
Joe Paladino, Records A	dministrator
(Name of Perso	n)
Sentry Manageme	ent, Inc.
(Name of Firm/Com	npany)
2180 W. State Road 43	4, Suite 5000
(Address)	
Longwood, FL 327	79-5044
(City/State and Zip	Code)
For further information concerning th	nis matter, please call:
Joe Paladino	at ( 407 ) 788-6700 ext. 227
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

TO: Amendment Section

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314

TIVISION OF CORPORATION

13 JAN 14 PH 2: 30

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 60	07.0502(2), 617.0502(2), 607.1509, or 617.1509,	
Florida Statutes, the undersigned,	James W. Hart, Jr.	
	(Name of Registered Agent)	
hereby resigns as Registered Agent for	Island Park Village, Section III, Condominium Association, Inc. (Name of Corporation)	
N03501	(Name of Corporation)	
(Document Number, if known)	<del></del>	
A copy of this resignation was mailed to	the above listed corporation at its last known address.	
The agency is terminated and the office this statement is filed.	discontinued on the 31st day after the date on which	
	4	
(9)	nature of Resigning Agent)	
If signing on behalf of an entity:		
Sen	atry Management, Inc.	
	Typed 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