

**NO4000009410**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

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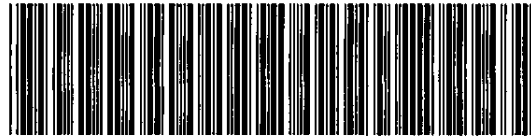
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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13 SEP 30 PM 1:10  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**C. LEWIS**  
OCT 4 2013  
**EXAMINER**

# Douglas House

419 Amelia Street • Key West, FL 33040 • (305) 294-5269 • 1-800-432-4849 • 1-800-833-0372 • Fax (305) 292-7665

October 1, 2013

Amendment Section  
Division of Corporations  
PO Box 6327  
Tallahassee, Florida 32314

Attn: Carolyn

RE: Resignation of Registered Agent - La Casa de Luces Condo Association, Inc.  
Document Number: N04000009410

Effective Immediately, I will no longer be the Registered Agent for La casa de Luces Condominium Association (please see attached Resignation of Registered Agent).

Please replace my contact information with the new registered agent:

Edwin Nickey  
112 South Federal Highway  
Pompano Beach, Florida 33062  
(Tel: 954-552-4333).

If you have any questions regarding this change, please feel free to contact me directly (305) 942-1607.  
Thank you for your prompt attention to this request.

Sincerely,

  
Robert Marrero



## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** LA CASA DE LUCES CONDOMINIUM ASSOCIATION, INC.  
(Name of Corporation)

**DOCUMENT NUMBER:** N04000009410

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:

**Richard M. Klitenick**

(Name of Person)

**Richard M. Klitenick, PA**

(Name of Firm/Company)

**1009 Simonton Street**

(Address)

**Key West, FL 33040**

(City/State and Zip Code)

For further information concerning this matter, please call:

**Richard M. Klitenick**

(Name of Person)

at ( **305** ) **292-4101**

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

**FILED**

13 SEP 30 PM 1:10

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

Florida Statutes, the undersigned, **ROBERT G. MARRERO**

(Name of Registered Agent)

hereby resigns as Registered Agent for **LA CASA DE LUCES CONDOMINIUM ASSOCIATION, INC.**

(Name of Corporation)

**N04000009410**

(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:

**Robert G. Marrero**  
(Typed or Printed Name)

**Registered Agent**  
(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**