

N04589

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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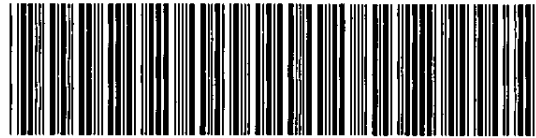
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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*RA R/S*  
*10/21/08*

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MIAMI-DADE 305.442.3334 | FAX 305.443.3292 | TOLL FREE 800.737.1390

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REPLY TO CORAL GABLES OFFICE

October 14, 2008

**VIA FEDERAL EXPRESS**

DANIEL J. BARSKY  
B. MICHAEL CLARK, JR.  
CHRISTOPHER J. DIMARE  
VINCENT B. FLOR  
ROBERT E. GEISLER  
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HOWARD J. PERL  
JASON M. RODGERS-DA CRUZ  
CARIDAD RUSCONI  
TIFFANY M. SEEMAN  
NICHOLAS D. SIEGFRIED  
L. CHERE TRIGG

Florida Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Re: Lakes of the Meadow Village Homes Condominium No. One  
Maintenance Association, Inc.  
Lakes of the Meadow Village Homes Condominium No. Two  
Maintenance Association, Inc.  
Lakes of the Meadow Village Homes Condominium No. Three  
Maintenance Association, Inc.  
Lakes of the Meadow Village Homes Condominium No. Four  
Maintenance Association, Inc.  
Lakes of the Meadow Village Homes Condominium No. Five  
Maintenance Association, Inc.  
Lakes of the Meadow Village Homes Condominium No. Six  
Maintenance Association, Inc.  
Lakes of the Meadow Village Homes Condominium No. Seven  
Maintenance Association, Inc.  
Lakes of the Meadow Village Homes Condominium No. Eight  
Maintenance Association, Inc.  
Lakes of the Meadow Village Homes Condominium No. Nine  
Maintenance Association, Inc.  
("Associations")**

OF COUNSEL

H. HUGH MCCONNELL, P.A.

Dear Sir/Madame:

Enclosed please find an original and one (1) copy of the Resignation of Registered Agent for each of the above referenced corporations, together with our check in the sum of \$787.50 (\$87.50 x 9) to cover the fees for filing same. Please date stamp the copy and return same to the undersigned in the enclosed self-addressed stamped envelope.

Should you have any questions, please do not hesitate to contact our office.

Sincerely,

SIEGFRIED, RIVERA, LERNER,  
DE LA TORRE & SOBEL, P.A.

  
Maria Victoria Arias

MVA/bly  
Enclosures

**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, SKRLD, INC.  
(Name of Registered Agent)

hereby resigns as Registered Agent for LAKES OF THE MEADOW VILLAGE HOMES CONDOMINIUM NO. FIVE  
MAINTENANCE ASSOCIATION, INC.,  
(Name of Corporation)

N04589  
(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:

LISA A. LERNER  
(Typed or Printed Name)

SECRETARY  
(Capacity)

FILED  
08 OCT 15 PM 1:43  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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