(Re	equestor's Name)	
(Ac	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	e #}
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COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: EL Portal Homeower's Association INC. (Name of Corporation)
DOCUMENT NUMBER: <u>NOS 00000 151 4</u>
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:
Andrew Dickman (Name of Person)
Law Offices of Andrew Dickman P.A. (Name of Firm/Company)
G52 1 St Ave S. Suite C (Address)
Naples FL 34102 (City/State and Zip Code)
For further information concerning this matter, please call:
Andrew Dickman at (305) 335-1303 (Name of Person) at (305) 335-1303 (Area Code & Daytime Telephone Number)
Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corners

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 60				
Florida Statutes, the undersigned,	Andrew (Name	Octoman Pi	<u> </u>	
hereby resigns as Registered Agent for _	EL Portal	Homeowner's ne of Corporation)	Association.	
NO 500000 1514	_			
(Document Number, if known)				
A copy of this resignation was mailed to	the above listed co	orporation at its las	t known address.	
The agency is terminated and the office of this statement is filed.	V. L		date on which	
If signing on behalf of an entity:			==	SIAIG 35
- Andre Reg	w Dick yped or Printed Name Stereo	MAN Hoen		VISION OF CORPORATION OF ANY - 9 AH 9: 1
	(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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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