NOSODOZYYI

(Red	uestor's Name)	
(Add	lress)	
(Add	Iress)	
PICK-UP	//State/Zip/Phone	MAIL
	iness Entity Nan	
Certified Copies	cument Number) Certificates	s of Status
Special Instructions to F	Filing Officer:	·
		





000248071170

05/21/13--01011--026 **87.50

CIA RAS

MAY 23 2013 R. WHITE FILED

13 NAY 21 AM 9: 45
SECRETARY OF STATE

COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJ	ECT: Fieldstone Estates at Meadow Woods
DOCU	(Name of Corporation) UMENT NUMBER: N0500002441
The er	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please	return all correspondence concerning this matter to the following:
Vic	ki Diaz
	(Name of Person)
Ferd	inandsen Enterprises dba World of Homes
	(Name of Firm/Company)
288	34 S Osceola Avenue
	(Address)
Orla	ando, FL 32806
	(City/State and Zip Code)
For fu	rther information concerning this matter, please call:
Mic	Chael Laster (Name of Person) at (407) 770-1748 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

Pursuant to the provisions of section	ons 607.0502(2), 617.0502(2), 607.1509, or 617.1	1509,
lorida Statutes, the undersigned, Ferdinandsen Enterprises dba World of Homes		
	(Name of Registered Agent)	
hereby resigns as Registered Agen	_{tt for} Fieldstone Estates at Meadow	Woods
(Name of Corporation)		
N05000002441		
(Document Number, if known)		
A copy of this resignation was ma	iled to the above listed corporation at its last know	vn address.
The agency is terminated and the of this statement is filed.	office discontinued on the 31st day after the date of	on which
Mu	11	
	(Signature of Resigning Agent)	eretire.
If signing on behalf of an entity:		≥窓 3
if signing on behan of an entity.		
Vicki Diaz		Y 21 IARY IASSE
	(Typed or Printed Name)	
President		9: 4 ORIU
-	(Capacity)	DA 45

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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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