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R. WHITE

COVER LETTER

	(Name of Person) (Area Code & Daytime Telephone Number)
Ka	rin Kirk (Name of Person) at (863) 256-5052 (Area Code & Daytime Telephone Number)
For fu	urther information concerning this matter, please call:
	(City/State and Zip Code)
Ch	ampionsgate, FL 33896
	(Address)
839	00 Championsgate Blvd. Suite 304
- (0)	(Name of Firm/Company)
Ae	gis Community Management
	(Name of Person)
Kaı	rin Kirk
Please	e return all correspondence concerning this matter to the following:
The e	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
DOC	UMENT NUMBER: N05000006397
	(Name of Corporation)
SUIDT	ECT: NEWBURY PARK HOA INC.
ro:	Amendment Section Division of Corporations

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 607.0502(2), 617.0502(2), 607.1509, or 617	.1509,	
Florida Statutes, the undersigned, Aegis Community Management Soluti	ons Ir	ıc.
(Name of Registered Agent)	_	
hereby resigns as Registered Agent for Newbury Park HOA Inc.		
(Name of Corporation)		
N9600005794		
(Document Number, if known)		
A copy of this resignation was mailed to the above listed corporation at its last known	own ado	iress.
The agency is terminated and the office discontinued on the 31st day after the date this statement is filed.	on wh	ich
Smillsur		
(S) gnature of Resigning Agent)		
If signing on behalf of an entity:		
David L. Burman		
(Typed or Printed Name)	= ,	ਲੇ
•	7 5	25
Reg. Agent		5 50/15
(Capacity)	[) [1]	P

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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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