N05000006677

Office Use Only



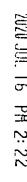
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CK. Resign



COVER LETTER

	Date: 06/30/2020
TO: Amendment Section Division of Corporations	
SUBJECT: PERLAS DEL MAR CONDOMINIUM ASSOCIA (Name of Corporation)	TION, INC.
DOCUMENT NUMBER: N05000006677	
The enclosed Resignation of Registered Agent for a Corporation and fe	e are submitted for filing.
Please return all correspondence concerning this matter to the following	<u>;</u> :
RAE ANN PARKER, RECORDS ADMINISTRATOR	
(Name of Person)	
Sentry Management, Inc.	
(Name of Firm/Company)	
2180 W. State Road 434, Suite 5000	
(Address)	
Longwood, FL 32779-5044	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
	00 ext. 22300
(Name of Person) (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 sections 6	607.0502(2), 617.0502(2), 607.1509, or 617	⁷ .1509,
Florida Statutes, the undersigned,	SENTRY MANAGEMENT INC	
	(Name of Registered Agent)	
hereby resigns as Registered Agent for PERLAS DEL MAR CONDOMINIUM A		SSOCIATION, INC.
	(Nam	e of Corporation)
N05000006677		
(Document Number, if known)		
A copy of this resignation was mailed t	o the above listed corporation at its last kn	own address.
The agency is terminated and the office this statement is filed.	e discontinued on the 31st day after the date	e on which
		_
S	ignation of Resigning Agent)	
If signing on behalf of an entity:		2020 JUL 8
Bradley Pomp, o	n behalf of, Sentry Management, Inc.	UL -
	(Typed or Printed Name)	- 6
		PH
	President	. · · · · · · · · · · · · · · · · · · ·
	(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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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