

NO5000008978

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

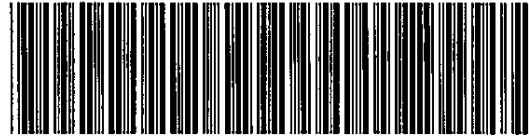
(Business Entity Name)

(Document Number)

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Resignation
to RA

08/25/14--01024--018 **87.50

FILED
2014 SEP 15 PM 2:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RA Resign *for* 9/16/14



FLORIDA DEPARTMENT OF STATE
Division of Corporations

September 4, 2014

KIM BALASKIEWICZ
MADISON PROPERTY MANAGEMENT SOLUTIONS, L
6960 BONNEVAL ROAD, SUITE 302
JACKSONVILLE, FL 32216 US

SUBJECT: WILLIAMS WALK CONDOMINIUM ASSOCIATION, INC.
Ref. Number: N05000008978

We have received your document for WILLIAMS WALK CONDOMINIUM ASSOCIATION, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing a computer printout which reflects the registered agent and registered office now on file with this office. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tina D Carter
Regulatory Specialist

Letter Number: 014A00018906

RECEIVED

14 SEP 15 PM 1:57

COVER LETTER

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

TO: Amendment Section
Division of Corporations

SUBJECT: Williams Walk Condominium Association, Inc.
(Name of Corporation)

DOCUMENT NUMBER: N05000008978

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:

Kim Balaskiewicz

(Name of Person)

Madison Property Management Solutions, LLC

(Name of Firm/Company)

6960 Bonneval Road, Suite 302

(Address)

Jacksonville, FL 32216

(City/State and Zip Code)

For further information concerning this matter, please call:

Irene Richardson at (904) 641-1858

(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 FILED**

2014 SEP 15 PM 2:00

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned, Madison Property Management Solutions, LLC
(Name of Registered Agent)

hereby resigns as Registered Agent for Williams Walk Condominium Association, Inc.
(Name of Corporation)

N05000008978

(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:

Kim Balaskiewicz

(Typed or Printed Name)

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**