

N05000009017

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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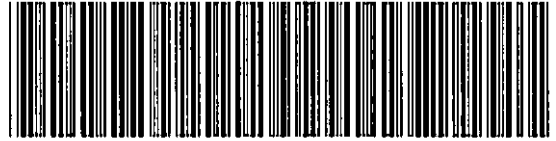
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

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cf 5/14/2022

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0503(2), 617.0502(2), 607.1509, or 617.1509, Florida Statutes, the undersigned, Arlene Fisher (Name of Registered Agent)

hereby resigns as Registered Agent for The Villas at Tramore Condominium Association, Inc. (Name of Corporation)

N0500009017
(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.

Arlene Fisher
(Signature of Resigning Agent)

If signing on behalf of an entity:

Arlene Fisher Arlene Fisher
(Typed or Printed Name)

resigned agent President - Registered Agent
(Capacity)

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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withdrawn corporation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