N050000 11725

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



200372931212

09/27/21--01014--011 +#87.50

2021 SEP 27 AM 4: 29
SECRETARY OF STATE
TALL ALLASSES FI

COVER LETTER

Date: 08/31/2021	
O: Amendment Section Division of Corporations	
SUBJECT: SUNSET POINTE TOWNHOMES HOMEOWNERS ASSOCIATION, INC	· •
·	
DOCUMENT NUMBER: N05000011725	
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:	
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:	
RAE ANN PARKERat (407) 788-6700 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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	.07.0502(2), 617.0502(2), 607.1509, or 617.	1309.		
Florida Statutes, the undersigned.	SENTRY MANAGEMENT	INC		
	(Name of Registered Agent)			
hereby resigns as Registered Agent for	SUNSET POINTE TOWNHOMES HOMEOWNERS ASSOCIATION, INC			
	(Name	of Corpora	tion)	
N05000011725				
(Document Number, if known)	_			
A copy of this resignation was mailed t	to the above listed corporation at its last kno	wn addre	SS.	
this statement is filed.	e discontinued on the 31st day after the date	on which		
If signing on behalf of an entity:	ignature (RETARY OF ALLAHASSE	2021 SEP 27 A	
Bradley Pomp, o	n behalf of, Sentry Management, Inc.	S M M		المسا
	(Typed or Printed Name)	STATE	附 4:29	*
	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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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