N05386

(R	equestor's Name)
(A	ddress)	
(A	ddress)	**
(C	ity/State/Zip/Phor	ne #)
PICK-UP	☐ WAIT	☐ MAIL
(B	usiness Entity Na	ame)
(D	ocument Numbe	r)
Certified Copies	Certificate	es of Status
Special Instructions to	Filing Officer:	·
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LAW OFFICES

SIEGERIED, RIVERA PERNER DE LA TORRE & SOBEL PA

201 ALHAMBRA CIRCLE | SUITE 1102 | CORAL GABLES, FLORIDA 33134 MIAMI-DADE 305.442.3334 | FAX 305.443.3292 | TOLL FREE 800.737.1390

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REPLY TO CORAL GABLES OFFICE

October 14, 2008

VIA FEDERAL EXPRESS

Florida Department of State Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

DANIEL J. BARSKY
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CARIDAD RUSCONI TIFFANY M. SEEMAN NICHOLAS D. SIEGFRIED

L. CHERE TRIGG

OF COUNSEL
H. HUGH McCONNELL, P.A.

Re: Lakes of the Meadow Village Homes Condominium No. One Maintenance Association, Inc.

Lakes of the Meadow Village Homes Condominium No. Two

Maintenance Association, Inc.
Lakes of the Meadow Village Homes Condominium No. Three

Maintenance Association, Inc.

Lakes of the Meadow Village Homes Condominium No. Four Maintenance Association, Inc.

Lakes of the Meadow Village Homes Condominium No. Five Maintenance Association, Inc.

Lakes of the Meadow Village Homes Condominium No. Six Maintenance Association. Inc.

Lakes of the Meadow Village Homes Condominium No. Seven Maintenance Association, Inc.

Lakes of the Meadow Village Homes Condominium No. Eight Maintenance Association. Inc.

Lakes of the Meadow Village Homes Condominium No. Nine Maintenance Association, Inc.

("Associations")

Dear Sir/Madame:

Enclosed please find an original and one (1) copy of the Resignation of Registered Agent for each of the above referenced corporations, together with our check in the sum of \$787.50 (\$87.50 x 9) to cover the fees for filing same. Please date stamp the copy and return same to the undersigned in the enclosed self-addressed stamped envelope.

Should you have any questions, please do not hesitate to contact our office.

Sincerely,

/SIEGFRIED, RIVERA, LERNER,

DE LA TORRE & SOBEL P.

Maria Victoria Arias

MVA/bly Enclosures

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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, SKRLD, INC.		
(Name of Registered Agent) LAKES OF THE MEADOW VILLAGE HOMES CONDOMINIUM hereby resigns as Registered Agent for MAINTENANCE ASSOCIATION, INC. (Name of Corporation)	NO.	SIX
N05386		
(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)	Ϋ́	
(Signature of Resigning Agent)		
If signing on behalf of an entity:	Ţ	
LISA A. LERNER	フ	
(Typed or Printed Name)		
SECRETARY		
(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