N0600000575

(F	Requestor's Name)			
(F	Address)			
(F	Address)			
(0	City/State/Zip/Phone #)			
PICK-UP	☐ WAIT ☐ MAIL			
(Business Entity Name)				
(Document Number)				
Certified Copies	Certificates of Status			
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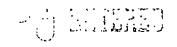
S TALLENT MAY 29 2018



R/D-Kesgn

COVER LETTER

TO: Amendment Section Division of Corporations				
Spring Ridge Estates Ho SUBJECT:	omeowners As:	sociation, Ir	nc.	
	(Name	of Corpora	ntion)	
DOCUMENT NUMBER: N06000	0000575			
The enclosed Resignation of Regis	stered Agent fo	or a Corpo	ration and fee are submitted for	filing.
Please return all correspondence co	oncerning this	matter to	the following:	
(Name of Per	son)		_	
Leland Management				
(Name of Firm/C	ompany)	· · · - · ·	_	
6972 Lake Gloria Blvd				
(Address)		_	
Orlando, FL 32809-3200				
(City/State and Z	ip Code)		_	
For further information concerning	g this matter, p	dease call:		
Romary Henriquez	ate	407	982-2866) le & Daytime Telephone Number)	
(Name of Person)	···	(Area Coo	le & Daytime Telephone Number)	
Enclosed is a check made payable or \$35.00 for an administratively d	to the Florida lissolved, volu	Departme intarily dis	nt of State for \$87.50 for an actisolved or withdrawn corporatio	ive corporation n.
Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	Mailing Ad Amendmer Division of Post Office Tallahassec	`Corporati e Box 6327	7	



RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of section	is 607.0502(2). 617.0502(2). 607.1509. or 617.1	509.
Florida Statutes, the undersigned, L	eland Management 1 NC.	
	(Name of Registered Agent)	
hereby resigns as Registered Agent f	for Spring Ridge Estates Homeowners Assoc	iation, Inc.
nereby resigns as registered regent i	(Name of Corporation)	
N06000000575		
(Document Number, if known)		
A copy of this resignation was maile	ed to the above listed corporation at its last know	vn address.
The agency is terminated and the off this statement is filed.	fice discontinued on the 31st day after the date of	on which
	(Signature of Resigning Agent)	
If signing on behalf of an entity:		· · · · · · · · · · · · · · · · · · ·
Rebecca Furlow		MAY 25
	(Typed or Printed Name)	雪 子 -
Agent		?: 0

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

(Capacity)