## N06000005583

| (Re                     | questor's Name)    |            |  |  |
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| Special Instructions to | Filing Officer:    |            |  |  |
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## **COVER LETTER**

| TO:         | Amendment Section Division of Corporations   |       |
|-------------|--|-------|
| SUBJE       | ECT: Wrenwood Condominium Association, Inc.  |       |
| O 130 1     | (Name of Corporation)  |       |
| DOCU        | JMENT NUMBER: N0600000583  |       |
| The en      | nclosed Resignation of Registered Agent for a Corporation and fee are submitted for fili         | ng. : |
| Please      | return all correspondence concerning this matter to the following:                               |       |
|             | Joe Paladino, Records Administrator  |       |
|             | (Name of Person)   |       |
|             | Sentry Management, Inc.  |       |
|             | (Name of Firm/Company)   |       |
|             | 2180 W. State Road 434, Suite 5000   |       |
|             | (Address)  |       |
|             | Longwood, FL 32779-5044  |       |
| <del></del> | (City/State and Zip Code)  |       |
| For fur     | rther information concerning this matter, please call:   |       |
|             | Joe Paladino at (407 ) 788-6700 ext. 227 (Name of Person) (Area Code & Daytime Telephone Number) |       |
|             | (Name of Person) (Area Code & Daytime Telephone Number)  |       |

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

| Florida Statutes, the undersigned, James W. Hart, Jr.  (Name of Registered Agent)  Mrenwood Condominium Association, Inc.  (Name of Corporation)  N06000000583  (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:  Sentry Management, Inc.  (Typed or Printed Name)  President  (Capacity) | Pursuant to the provisions of sections 60 | 07.0502(2), 617.0502(2), 607.1509, or 617.1509, |     |  |
|--|---|---|-----|--|
| hereby resigns as Registered Agent for   | Florida Statutes, the undersigned,        |   |     |  |
| (Name of Corporation)  N06000000583  (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.  Sentry Management, Inc.  (Typed or Printed Name)  President   |   | (Name of Registered Agent)                      |     |  |
| N06000000583  (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   10 JUL 19 AM 9: 009    Sentry Management, Inc.   10 JUL 19 AM 9: 009    President   10 JUL 19 AM 9: 009   | hereby resigns as Registered Agent for    |   | ,   |  |
| (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:  Sentry Management, Inc.  (Typed or Printed Name)  President   |   | (Name of Corporation)                           |     |  |
| 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.  If signing on behalf of an entity:  Sentry Management, Inc.  (Typed or Printed Name)  President   | N0600000583                               |   |     |  |
| The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.    Compared to the statement of Resigning Agent  | (Document Number, if known)               | <del></del>                                     | -   |  |
| If signing on behalf of an entity:  Sentry Management, Inc.  (Typed or Printed Name)  President  | The agency is terminated and the office   | ·   |     |  |
| Company  | If signing on behalf of an entity:        | ntry Management, Inc.  Typed or Printed Name)   | *** |  |

## 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