N06000000911

(Requ	uestor's Name)	
(Addı	ess)	
(Addr	ess)	
(City/	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Na	me)
(Doc	ument Number))
Certified Copies	Certificate	s of Status
Special Instructions to Fi	iling Officer:	
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COVER LETTER

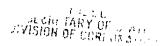
(Name of Corporation)	
DOCUMENT NUMBER: N06000000911	
The enclosed Resignation of Registered Agent for a Corporation and fee are subn	nitted for filing
Please return all correspondence concerning this matter to the following:	
Tim Huntsman	
(Name of Person)	
Leland Management Inc	
(Name of Firm/Company)	
6972 Lake Gloria Blvd	
(Address)	
Orlando, FL 32809	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Tim Huntsman at (407) 781-5791	

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

TO: Amendment Section

Mailing Address:
Amendment Section
Division of Corporations
Post Office Box 6327
Tallahassee, FL 32314



RESIGNATION OF REGISTERED AGENT 2017 FEB - 6 AM 10: 44 FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.	1509,
Florida Statutes, the undersigned,LELAND MANAGEMENT, INC.	
(Name of Registered Agent)	
hereby resigns as Registered Agent forLake Mary Towhnomes Owners' Association, Inc.	
(Name of Corporation)	
N06000000911	
(Document Number, if known)	
A copy of this resignation was mailed to the above listed corporation at its last kno	wn address.
The agency is terminated and the office discontinued on the 31st day after the date this statement is filed.	on which
Danul Filew	
(Signature of Resigning Agent)	
If signing on behalf of an entity:	
DANIEL FURLOW	
(Typed or Printed Name)	
AGENT	
(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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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