

Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H08000198446 3)))



H080001984483ABC7

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6380

From:

: CORPDIRECT AGENTS, INC. Account Name

110450000714 Account Number : Phone (850) 222-1173

Fax Number (850) 224-1640

REGISTERED AGENT RESIGNATION

ESTON 55 PLUS CONDOMINIUM ASSOCIATION, INC.

| Certificate of Status | 0 |
|-----------------------|---------|
| Certified Copy | 0 |
| Page Count | 01 |
| Estimated Charge | \$87.50 |

Electronic Filing Menu

Corporate Filing Menu

Help

SI

H08000198446 3

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

| Linguant to the broastons of sections of | 07.0302(2), 017.0302(2), 007.1309, 07 017.1309, | |
|--|---|---------|
| Florida Statutes, the undersigned, OF | car L. Rolz | |
| | (Name of Registered Agent) | |
| hereby resigns as Registered Agent for | Weston 55 Plus Condominium Association, Inc. | |
| | (Name of Corporation) | |
| N06000005863 | | |
| (Document Number, if known) | | |
| A copy of this resignation was mailed t | o the above listed corporation at its last known address. | |
| The agency is terminated and the office this statement is filed. | discontinued on the 31st day after the date on which | |
| (S | gasture of Resigning Agent) | |
| If signing on behalf of an entity: | | . , |
| - | (Typed or Printed Name) | |
| | | |
| | (Capacity) | AUG |
| \$87.50 - Ac \$35.00 - Ac | ng this document: stive corporation diministratively dissolved/voluntarily dissolved/ | 21 MIIO |

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314