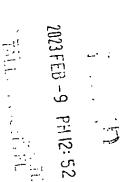
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(Requestor's Name)						
(Address)						
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(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
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COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJE	CT: Amelia Walk Homeowners Association, Inc.
DOCU	MENT NUMBER: N06000006414 (Name of Corporation)
The enc	losed Resignation of D
Please re	losed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Gris Rome	ero ero the following:
	(Name of Person) Lifestyles Management LLC (Name of Firm/Company) If St., Ste 340
Winter Garde	
For further i	(City/State and Zip Code) Information concerning this matter, please call:
Gris Romero	and picase call:
	(Name of Person) at (321) 558-6511 (Area Code & Daytime Telephone Number)
Enclosed is a or \$35.00 for	check made payable to the Florida Department of State 6

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address:

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee. FL 32303

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to	the provisions of an					
Florida Sta	tutes, the undersigned	etions 607.0503(2), 61 Evergreen Lifestyles	7.0502(2), 607.1 Management LLC	509. or	617.1 <u>9</u>	509.
hereby resig	ens as Registered Age	nt for Amelia Walk Hon	Name of Registered	Agent)		
N060000064	14	(Name of Corporation)				
(Docu	iment Number, if known)					
statement	is resignation was mains terminated and the object is filed.	iled to the above listed ffice discontinued on Roman (Signature of Resigning A	the 31st day afte	ts last ki	nown a	address. /hich
	Gris Romero	(Typed or Printed Name)		2023 FEB	400 PP\$
	Executive Director of Su		,	3 3 3 3 3	-9 PM12:52	: :

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