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COVER LETTER

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TO: Amendment Section Division of Corporations				Litt S. T. S
SUBJECT: Braemar/Gotha Home	eowners Associatio	n Inc		ξο
M ₁ SOBOLOCI.	(Name of Corpor	ration)		
th E. DOCUMENT NUMBER: N0600 E. N0600)0009741			
Please return all correspondence cor		o the following:		
(Name of Person	on)			
Leland Management				
(Name of Firm/Con	mpany)			
6972 Lake Gloria Boulevard				
(Address)				
Orlando, FL 32809				
(City/State and Zip	Code)			
For further information concerning	this matter, please cal	11:		
1 of further information concerning				

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

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

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

RESIGNATION OF REGISTERED AGENT 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 (Name of Registered Agent)
hereby resigns as Registered Agent for Braemar/Gotha Homeowners Association Inc (Name of Corporation)
N0600009741
(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. Compared Turlow
If signing on behalf of an entity:
Rebecca 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✓ \$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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