N06000010632

(R	Requestor's Name)	
(A	ddress)	<u></u>
A)	ddress)	<u> </u>
(C	City/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL.
(E	Business Entity Nam	e)
. (0	Document Number)	
Certified Copies	: Centificates	of Status
Special Instructions t	o Filing Officer	
1		

Office Use Only



000322000570

01/03/13--01025--021 (**1487.50

....1. S. PRATHE!

COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJ	JECT: JARDIN CONDOMINIUM ASSOCIATION XVIII, INC.
	(Name of Corporation) UMENT NUMBER: N06000010632
	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing
Please	e return all correspondence concerning this matter to the following:
Te	ri Armstrong (Name of Person)
Arm	nstrong Management Company, LLC (Name of Firm/Company)
112	250 Old St. Augustine Rd., #15396 (Address)
Jac	Cksonville, FL 32257 (City/State and Zip Code)
For fu	urther information concerning this matter, please call:
Те	ri Armstrong at (904) 372-3225 (Name of Person) (Area Code & Daytime Telephone Number)

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

Pursuant to the provisions of section	ons 607.0502(2), 617.0502(2), 607.1509, or 617			
Florida Statutes, the undersigned,	Armstrong Management Company, LLC (Name of Registered Agent)			
	JARDIN CONDOMINIUM ASSOCIATION XVIII, INC.			
hereby resigns as Registered Agen	(Name of Corporation)	<u> </u>		
N06000010632	, , , , ,			
(Document Number, if known)				
A copy of this resignation was mal	iled to the above listed corporation at its last kn	own address.		
The agency is terminated and the c this statement is filed.	Infice discontinued on the 31st day after the date Len A. Armoticus	e on which		
	(Signature of Resigning Agent)			
If signing on behalf of an entity:		2019 JAN -3		
Armstrong	Management Company, LLC	N-3 PH		
	(Typed or Printed Name)			
Owner		PH 1:22		
	(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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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