NO6000010766

(Requestor's Name)		
(Address)		
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FEB 25 .

COVER LETTER

TCO.	Date: 12/31/2021
TO:	Amendment Section Division of Corporations
SUB.	JECT: LANDINGS AT SUGAR MILL HOMEOWNERS ASSOCIATION, INC. (Name of Corporation)
DOC	CUMENT NUMBER: N06000010766
	enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Pleas	se return all correspondence concerning this matter to the following:
RA	E ANN PARKER, RECORDS ADMINISTRATOR
	(Name of Person)
	Sentry Management, Inc.
	(Name of Firm/Company)
	2180 W. State Road 434, Suite 5000
	(Address)
	Longwood, FL 32779-5044
	(City/State and Zip Code)
For f	further information concerning this matter, please call:
RAI	E ANN PARKER at (407) 788-6700 ext. 22300 (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)
Encl or \$3	losed is a check made payable to the Florida Department of State for \$87.50 for an active corporation 35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.
Ame Divis Clift 2661	et Address: endment Section fision of Corporations ton Building 1 Executive Center Circle ahassee, FL 32301

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

RESIGNATION OF REGISTERED AGENT FEB 18 PM 1: 55

Pursuant to the provisions of sections 6	07.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned.	SENTRY MANAGEMENT INC
	(Name of Registered Agent)
hereby resigns as Registered Agent for	LANDINGS AT SUGAR MILL HOMEOWNERS ASSOCIATION, INC.
hereby resigns as registered ingenitres	(Name of Corporation)
N06000010766	
(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.	e discontinued on the 31st day after the date on which
If signing on behalf of an entity:	ignature (Posigning - vent)
Bradley Pomp, or	n behalf of, Sentry Management, Inc.
	(Typed or Printed Name)
	President
	(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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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