NO67/2

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JUN 0 6 2018 S. YOUNG CN. I JAN OF STATE
LLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: The Waterford Condominium Association of Jacksonville, Inc.
(Name of Corporation)
DOCUMENT NUMBER: N06712
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
Kim Balaskiewicz
(Name of Person)
Madison Property Management Solutions, LLC (Name of Firm/Company)
6960 Bonneval Road, Ste 302
Jacksonville, FL 32216 (City/State and Zip Code)
For further information concerning this matter, please call:
Irene Richardson at (904) 641-1858 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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, c	or 617	.1509,		
Florida Statutes, the undersigned,	Madison Property Management S		ons Ll	<u>.C</u>	
	(Name of Registered Agent)	1			
hereby resigns as Registered Agen	The Waterford Condominium Association t for	of Jac	ksonville,	Inc.	
	(Name of Corporation)				
N06712					
(Document Number, if known)					
A copy of this resignation was mai	iled to the above listed corporation at its la	ıst kno	own add	ress.	
The agency is terminated and the of this statement is filed.	office discontinued on the 31st day after th	e date	on whic	ch	
K1	(Signature of Resigning Agent)	<u>; </u>	JALL	18	
If signing on behalf of an entity:		:	AHASSI	NOK - 4	
Kim Balask	kiewicz	-		72	F
Managing l	(Typed or Printed Name) Member	·	LORIDA	14:47	

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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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

(Capacity)