

NO7000003230

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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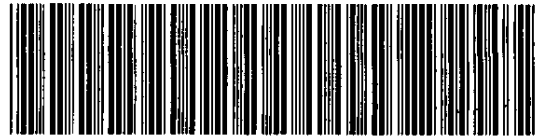
(Business Entity Name)

(Document Number)

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09 AUG 26 AM 11:52  
TALLAHASSEE, FLORIDA  
TALLAHASSEE, FLORIDA

RA Resign  
Tlews  
8-27-09

**BECKER &  
POLIAKOFF**

**Emerald Lake Corporate Park  
3111 Stirling Road  
Fort Lauderdale, FL 33312-6525  
Phone: (954) 987-7550 Fax: (954) 985-4170  
US Toll Free: (800) 432-7712**

**Mailing Address:  
P.O. Box 9057  
Ft. Lauderdale, FL 33310-9057**

**ADMINISTRATIVE OFFICE  
3111 STIRLING ROAD  
FORT LAUDERDALE, FL 33312  
954.987.7550**

**WWW.BECKER-POLIAKOFF.COM  
BP@BECKER-POLIAKOFF.COM**

August 20, 2009

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

**Reply To:  
Fort Lauderdale  
Doretta Martone Knoerr, Esq.  
Direct dial: (954) 985-4159  
dknoerr@becker-poliakoff.com**

**Re: Majorca Isles III Condominium Association, Inc. -  
Document Number: N07000003230  
Resignation of Registered Agent**

Dear Sir or Madam:

Enclosed herewith please find Resignation of Registered Agent for the above-referenced Florida corporation for filing with your office, together with our check in the amount of \$87.50 in payment of your filing fee. Please return all correspondence concerning this matter to the undersigned at the above address.

Very truly yours,



Doretta Martone Knoerr  
For the Firm

DMK/cz  
Enclosure

cc: Majorca Isles III Condominium Association, Inc.

FLORIDA OFFICES  
BOCA RATON  
FORT MYERS  
FORT WALTON BEACH  
HOLLYWOOD  
HOMESTEAD  
MELBOURNE  
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PARIS  
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ACTIVE: 2669102\_1

\* by appointment only

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**RESIGNATION OF REGISTERED AGENT 09 AUG 26 AM 11:52  
FOR A CORPORATION**

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,  
Florida Statutes, the undersigned, Doretta Martone Knoerr  
(Name of Registered Agent)

hereby resigns as Registered Agent for Majorca Isles III Condominium Association, Inc.  
(Name of Corporation)

N07000003230  
(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.

*Doretta Martone Knoerr, Esq.*  
(Signature of Resigning Agent)

If signing on behalf of an entity:

BECKER & POLIAKOFF, P.A.  
(Typed or Printed Name)

For the Firm as Registered 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**