N07000005804

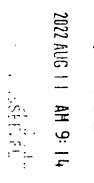
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COVER LETTER

TO: Amendment Section Division of Corporations			
SUBJECT: PALM SQUARE AT BELLE ISLE CONDOMINIUM ASSOCIATION, INC.			
(Name of Corporation)			
DOCUMENT NUMBER: N07000005804			
The enclosed Resignation of Registered Agent for a Corporation and fee are submitte	ed for filing.		
Please return all correspondence concerning this matter to the following:			
LISA WEATHERS			
(Name of Person)			
LELAND MANAGEMENT		- 1	
(Name of Firm/Company)		2022	
6972 LAKE GLORIA BLVD	<u> </u>	2022 AUG 1 I	' - j ¯
(Address)		_	
ORLANDO, FL 32809	, -	Ari	ă U
(City/State and Zip Code)		9: 14	W. W.
For further information concerning this matter, please call:	(***	£	
GERALDINE MARRERO at (407) 781-5793			
(Name of Person) (Area Code & Daytime Telephone Nun	nber)		

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Mailing Address:

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

Street Address:

Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of section	ons 607.0503(2), 617.0502(2), 607.1509, or 617	7.1509,
	LELAND MANAGEMENT, INC.	
Florida Statutes, the undersigned,	(Name of Registered Agent)	
	nt for PALM SQUARE AT BELLE ISLE CONDOMINIUM (Name of Corporation)	ASSOCIATION, INC.
hereby resigns as Registered Agen	(Name of Corporation)	
N07000005804	<u></u>	
(Document Number, if known)		
	ailed to the above listed corporation at its last kn	
The agency is terminated and the this statement is filed.	office discontinued on the 31st day after the dat Likeca Fulbu	_
	(Signature of Resigning Agent)	202
If signing on behalf of an entity:		3- 11 2022 Aug 1
REBECCA FUR	RLOW	= -
	(Typed or Printed Name)	- 22 2 1
PRESIDENT		MM 9: 14
	(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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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