N12000010293

(Re	equestor's Name)	
(A	ddress)	
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	ity/State/Zip/Phone	- 4A
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PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Nan	ne)
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	ocument Number)	
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Special Instructions to Filing Officer:		
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COVER LETTER

TO: Amendment Section Division of Corporations		
Oaks of Eden Homeowners Associati		
	Name of Corporati	on)
DOCUMENT NUMBER: N12000010293		
The enclosed Resignation of Registered Ag	ent for a Corpora	ation and fee are submitted for filing.
Please return all correspondence concerning	g this matter to th	e foilowing:
Dina Brown		
(Name of Person)		
D R Horton		
(Name of Firm/Company)		
14251 PCB Parkway		
(Address)		
Panama City Beach FL 32413		
(City/State and Zip Code)	-	
For further information concerning this mat	tter, please call:	
Dina Brown	352 at (504-6055 & Daytime Telephone Number)
(Name of Person)	(Area Code	& Daytime Telephone Number)

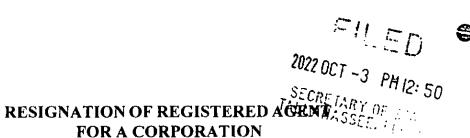
Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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



FOR A CORPORATION

Pursuant to the	provisions of sections 607.0503(2), 617.0502(2), 607.1509, or 617.1509,
Elorida Statutes	the undersigned, D.R. Horton Inc.
Tiorida Statutes	(Name of Registered Agent)
harahir rasians a	s Registered Agent forOaks of Eden Homeowners Association, Inc
nereny resigns a	(Name of Corporation)
N12000010293	
(Documer	t Number, if known)
•	esignation was mailed to the above listed corporation at its last known address. rminated and the office discontinued on the 31st day after the date on which filed.
	(Signature of Resigning Agent)
If signing on be	half of an entity:
	Dina Brown
	(Typed or Printed Name)
	HOA Manager Northern Gulf Coast Division D R Horton Inc
	(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