## N13719

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## **COVER LETTER**

TO: Amendment Sec Division of Corp		
OHATRAINE	AT IACARANDA GARĐENS, CONDO	OMINIUM ONE ASSOCIATION, IN
SUBJECT:	AT JACARANDA GARDENS, CONDO	
	(Name of Corpora	ation)
DOCUMENT NUMBE	R:	
The enclosed Resignation	on of Registered Agent for a Corpo	oration and fee are submitted for filing.
Please return all corresp	ondence concerning this matter to	the following:
	Name of Person)	_
TD Sunshine Property Man	agement	
(Nam	ne of Firm/Company)	<del>_</del>
P.O. Box 122015		
	(Address)	
Fort Lauderdale, FL 33312		
(City	/State and Zip Code)	_
For further information	concerning this matter, please call	:
	at (	)
(Name o	f Person) at (at Co-	de & Daytime Telephone Number)
Enclosed is a check may or \$35.00 for an admin	de payable to the Florida Departme stratively dissolved, voluntarily di	ent of State for \$87.50 for an active corporation ssolved or withdrawn corporation.
Mailing Address	<u>l:</u>	Street Address:
Amendment Sect	ion	Amendment Section
Division of Corp	orations	Division of Corporations
P.O. Box 6327		The Centre of Tallahassee
Tallahassee FI 1	17314	2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the prov	isions of sections 607.0503(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the	undersigned, Iglesias Law Group, P.A.
harahu rasians as Da	gistered Agent for QUATRAINE AT JACARANDA GARDENS, CONDOMINIUM (Name of Corporation)
fictery resigns as icc	(Name of Corporation)
N13719	
(Document Nur	nber, if known)
A copy of this resign	ation was mailed to the above listed corporation at its last known address.
The agency is termine this statement is filed	ated and the office discontinued on the 31st day after the date on which d.
	(Signature of Regigning Agent)
	(Signature of Refigning Agent)
If signing on behalf	of an entity:
Da	yid Iglesias. Esq.
	(Typed or Printed Name)
Pre	sident
	(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for filing this document:  \$87.50 - Active Corporation  \$35.00 - Administratively dissolved/voluntarily dissolved/  withdrawn corporation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