

N14 0000008441

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

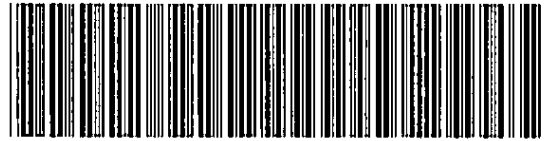
(Business Entity Name)

(Document Number)

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R. WHITE

AUG 09 2021

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: SMRT HOMEOWNERS ASSOCIATION INC., A FLORIDA CORPORATION

(Name of Corporation)

DOCUMENT NUMBER: N14000008441

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

DAVIDA MCPHEE

(Name of Person)

(Name of Firm/Company)

12340 NW 15TH STREET

(Address)

PLANTATION, FLORIDA 33323

(City/State and Zip Code)

For further information concerning this matter, please call:

DAVIDA MCPHEE

(Name of Person)

at (601) 832 2495

(Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

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

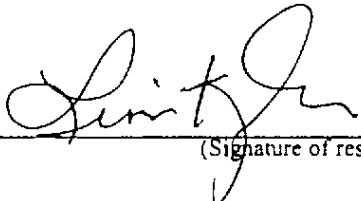
**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

I, LISA KLIKA, hereby resign as SECRETARY/TREASURER/DIRECTOR
(Title)

of SMRT HOMEOWNERS ASSOCIATION INC
(Name of Corporation)

N14000008441, a corporation organized under the laws of the State of
(Document Number, if known)

FLORIDA

 May 5, 2021
(Signature of resigning officer/director)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

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