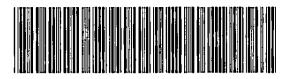
# N16000002196

(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only

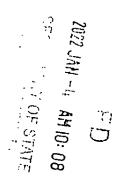
A. RIVERS JAN 2 4 2022



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### **COVER LETTER**

TO:	Amendment Section Division of Corporations
SUBJ	The Residences at Bentley Green Homeowners Association, Inc.
00	(Name of Corporation)
DOC	JMENT NUMBER: N16000002196
The e	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please	e return all correspondence concerning this matter to the following:
Lisa W	'eathers
	(Name of Person)
Leland	Management, Inc.
	(Name of Firm/Company)
69 <b>7</b> 2 L	ake Gloria Blvd.
	(Address)
Orland	o, FL 32809
	(City/State and Zip Code)
For fi	rther information concerning this matter, please call:
Angela	a Palanza 407 982-3137 at ( )
	(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provision	ons of section	ns 607.0503(2), 617.0502(2), 607.1509, or 617	1509.	
Florida Statutes, the unc	dersioned l	Leland Management, Inc.		
rorad statutes, the uni	dersigned; _	(Name of Registered Agent)		
hereby resigns as Regis	tered Agent	The Residences at Bentley Green Homeowners Ass	ociatio	n. Inc.
nereby resigns as regis	tered Agent	(Name of Corporation)		
N16000002196				
(Document Number	r. if known)			
A copy of this resignation	on was mail	led to the above listed corporation at its last kno	wn ad	ldress.
The agency is terminate this statement is filed.  ———————————————————————————————————	<u>L kee</u>	ffice discontinued on the 31st day after the date  (Signature of Resigning Agent)	on wh	nich
Rebecc	a Furlow			
Preside	ent	(Typed or Printed Name) 29 (7)	2022 JAN -	
	\$87.50 -	(Capacity)  filing this document:  Active Corporation  Administratively dissolved/voluntarily dissolved/	2022 JAN -1, AM 10: 08	

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

withdrawn corporation