# 116000004712

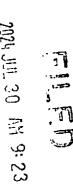
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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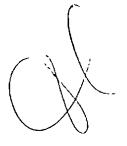
Office Use Only



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### **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: The Preserve at Crown Point Homeowners Association, Inc.	
(Name of Corporation)	
DOCUMENT NUMBER: N16000004712	
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for	filing.
Please return all correspondence concerning this matter to the following:	2024
Lisa Weathers	 <del>ت</del>
(Name of Person)	[3 <sub>]</sub>
Leland Management, Inc.	2024 JUL 30 MH
(Name of Firm/Company)	်ပ္
6972 Lake Gloria Błvd.	23
(Address)	
Orlando, FL 32809	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Geraldine Marrero at ( 407 ) 781-5793	
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 provisions of sections	s 607.0503(2), 617.0502(2), 607.1509, or 617.1509.
Florida Statutes, the undersigned. $oxedsymbol{\bot}$	Leland Management, Inc.
-	(Name of Registered Agent)
hereby resigns as Registered Agent fo	or The Preserve at Crown Point Homeowners Association, Inc
	(Name of Corporation)
N16000004712	
(Document Number, if known)	<del></del>
A copy of this resignation was mailed	d to the above listed corporation at its last known address.
The agency is terminated and the offithis statement is filed.	leca Tur (120)
If signing on behalf of an entity:	(Signature of Resigning Agent)  2024  ULL ecca Furlow
Rebe	ecca Furlow
	(Typed or Printed Name)
Presk	cent
	Canacita

## 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

(Capacity)