10/19/2020

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Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6380

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Fmail:	Address:			

REGISTERED AGENT RESIGNATION GULF SOUTH CENTER CONDOMINIUM ASSOCIATION, INC.

Certificate of Status	0
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Help

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 61	7.1509.
Florida Statutes, the undersigned, CT CORPORATION SYSTEM	
(Name of Registered Agart)	
hereby resigns as Registered Agent for	CIATION, INC
(Name of Capazin)	·
N16520	
(Document Number, if known)	
A copy of this resignation was mailed to the above listed corporation at its last kr	nown address
The agency is terminated and the office discontinued on the 31st day after the dat this statement is filed.	e on which
Kilag Jangay	_
(Signature of Resigning Agert)	
If signing on behalf of an entity:	, .
CT CORPORATION SYSTEM - Kimberly Laughrey	
(Typed or Printed Navo)	
ASSISTANT SECRETARY	
(Charly)	_
	,

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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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