N17000003293

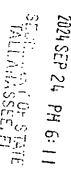


Office Use Only



500436972625

09/24/24--01026--008 **87.50



COVER LETTER

то:	Amendment Section Division of Corporations
SUBJ	Preserve at West Villages Community Association Inc.
	(Name of Corporation)
DOC	UMENT NUMBER: N17000003293
The e	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing
Pleas	e return all correspondence concerning this matter to the following:
Lisa W	['] eathers
	(Name of Person)
Leland	Management, Inc.
•	(Name of Firm/Company)
6972 I	ake Gloria Blvd
	(Address)
Orland	lo. FL 32809
	(City/State and Zip Code)
For fi	orther information concerning this matter, please call:
Jennife	er Adorno 239 268-7480 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 provisions of sections 6	507.0503(2), 617.0502(2), 607.1509, or 617.1509,		
Florida Statutes, the undersigned, Lelan	nd Management, Inc.	<u></u>	
_	(Name of Registered Agent)		
hereby resigns as Registered Agent for Preserve at West Villages Community Association, Inc.			
(Name of Corporation)			
N17000003293			
(Document Number, if known)	<u> </u>		
A copy of this resignation was mailed t	to the above listed corporation at its last known add	ess.	
The agency is terminated and the office this statement is filed.	a Juribu ignature of Resigning Agent)	c h	
If signing on behalf of an entity:	(^ m 	2024 SEP 24	
Rebecca Furlow	em 2 em 2 Best	SEP.	
	(Typed or Printed Name)	24	
	SS.	PH .	
President	ω_{ω}		
	(Capacity)	<u>−</u> ë:	

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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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