N1700000 9704

(Requestor's Name)	
(Address)	
(Address)	
(Addiess)	
(City/State/Zip/Phone #)	
CI DICK US CI MAIT CI MAII	
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	
(,	
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer:	
·	
	ı
	ł

Office Use Only



500368923425

06/28/21--01017-+024 **87.50

2021 JUN 28 AM 8: 38

RARCS

JUL 2 1 2021 ALBRITTON

COVER LETTER

TO: Amendment Section Division of Corporations
SUBJECT: LAKESHORE OAKS HOMEOWNERS ASSOCIATION, INC.
(Name of Corporation) DOCUMENT NUMBER: N17000009704
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:
(Name of Person)
ELITE MANAGEMENT GROUP
(Name of Firm/Company)
18940 N. DALE MABRY HWY., SUITE 101
(Address)
LUTZ, FL 33548
(City/State and Zip Code)
For further information concerning this matter, please call:
Brooke Weigart at (813) 458-7092 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

1509,
ATION, INC.
wn address.
on which
20:
\$2021 JUN 28
28
6 B 1
60
AM 8: 38

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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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