## N 19788

(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:	
	ŀ
	ĺ

Office Use Only



800337891268

19/11/19--01013--002 \*\*97.50

SECRETARY OF STATE

2A/Res

JAN 1 4 2020 LALBRITTON

## COVER LETTER

Division of Corporations
The Palms Section III Homeowners Association Inc.
(Name of Corporation)
DOCUMENT NUMBER: N19788
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:
Theresa Sutherland
(Name of Person)
Sutherland Management Inc.
(Name of Firm/Company)
107 N. Line Drive
(Address)
Apopka, FL 32703
(City/State and Zip Code)
For further information concerning this matter, please call:

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

Theresa Sutherland

(Name of Person)

Mailing Address:

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



## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

rursuant to the provisions of sections of	007.0392(2), 017.0302(2), 007.1309, 000	17.1309,
Florida Statutes, the undersigned, Th	eresă Sutherland	
	(Name of Registered Agent)	
annaharaniana an Daniatanad Award San	THE PALMS - SECTION III HOMEOWNERS' AS:	SOCIATION, INC.
nereby resigns as Registered Agent for	(Name of Corporation)	<del></del>
N110700	( ,	
N19788		
(Document Number, if known)		
A copy of this resignation was mailed	to the above listed corporation at its last k	nown address.
The agency is terminated and the office this statement is filed.	e discontinued on the 31st day after the da	ate on which
× Olheuse	fathulan 2	
, (5	Signature of Resigning Agent)	
If signing on behalf of an entity:		
		20 5 5
	(Tarada - Daire - IVI)	2019 DEC SECRE IS TALL AND
	(Typed or Printed Name)	
		75記 -
		SHE T
· · · · · · · · · · · · · · · · · · ·	(Capacity)	- Ye 🔀 ¦
		- 18 - 18 - 18 - 18 - 18 - 18 - 18 - 18
		PH 4: 46 E. FLORIDI
		15. G.

## 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withdrawn corporation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