N21000007327

(Requestor's Name)
(Address)
(National)
(Address)
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COVER LETTER

Division of Corporations	
The Enclave at Lakeridge Homeown	ners Association, Inc.
SUBJECT:	(Name of Corporation)
DOCUMENT NUMBER: N21000007327	
The enclosed Resignation of Registered A	gent for a Corporation and fee are submitted for filing.
Please return all correspondence concerning	ng this matter to the following:
Adam Feldman	
(Name of Person)	
LDA Ventures 3, LLC	
(Name of Firm/Company)
21475 Linwood Court	
(Address)	
Boca Raton, Florida 33433	
(City/State and Zip Code))
For further information concerning this m	atter, please call:
Adam Feldman	561 716-6764 at ()
(Name of Person)	at () (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 secti	ions 607.0503(2), 617.0502(2), 607.1509, or 617.1509,	
Florida Statutes, the undersigned,	Adam Feldman	
,	(Name of Registered Agent)	
hereby resigns as Registered Ager	The Enclave at Lakeridge Homeowners Association, Inc.	
nereby resigns as Registered Ager	(Name of Corporation)	
N21000007327		
(Document Number, if known)		
A copy of this resignation was ma	ailed to the above listed corporation at its last known add	dress.
The agency is terminated and the this statement is filed.	office discontinued on the 31st day after the date on wh	ich
(Win Film Film	7023 OCT 23
	(Signature of Resigning Agent)	그 🚆
If signing on behalf of an entity:	io γ [*]	Godina.
NA		PH 1: 53
	(Typed or Printed Name)	ప
NA		
	(Capacity)	

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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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