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To:

Division of Corporations

Page, 1 of 3

Fax Number : (850)617-6380

From:

Account Name : STEARNS WEAVER MILLER

Account Number : I19990000211 Phone : (813)223-4800 : (813)441-8860 Fax Number

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

Email Address: Amalia.Papadimitriou@mattamycorp.com

REGISTERED AGENT RESIGNATION LAKESPUR I CONDOMINIUM ASSOCIATION, INC.

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COVER LETTER

TO: Amendment Division o	nt Section f Corporations
Lakespi SUBJECT:	r I Condominium Association, Inc.
	(Name of Corporation)
DOCUMENT NU	MBER: N24000013886
The enclosed Resi	gnation of Registered Agent for a Corporation and fee are submitted for filing.
Please return all co	orrespondence concerning this matter to the following:
Christian F. O'Ryan,	Bsq.
	(Name of Person)
Steams Weaver Mille	r Weissler Alhadeff & Sitterson, P.A.
	(Name of Firm/Company)
401 E. Jackson Street	Suite 2100
	(Address)
Tampa, FL 33602	
-	(City/State and Zip Code)
For further inform	ation concerning this matter, please call:
Mary Anderson	813 222-5038 at ()
(N	ame 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

18134418860

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

	ons 607.0503(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned.	Christian F. O'Ryan, Esq. c/o Stearns Weaver Miller Weissler et al.
	(Name of Registered Agent)
hereby resigns as Registered Agen	Lakespur I Condominium Association, Inc.
notedy resigns as registered rigen	(Name of Corporation)
N24000013886	
(Document Number, if known)	
A copy of this resignation was ma	iled to the above listed corporation at its last known address.
The agency is terminated and the other this statement is filed.	office discontinued on the 31st day after the date on which
	0012
	(Signature of Resigning Agent)
If signing on behalf of an entity:	
Christian F. O'Ryan	, Esq.
	(Typed or Printed Name)
	2 025 ΤΑ
Attorney	
	SECRE FARY OF TALLAHASSEE (Capacity)
\$87.50	filing this document: - Active Corporation
\$35.00	- Administratively dissolved/voluntarily dissolved/

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

withdrawn corporation