# N26776

(Requestor's Name)
(Address)
(Address)
,
(CiviCous GialObarra 40
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Excument Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





500390065775

06/28/22--01014--021 \*+87.50





### **COVER LETTER**

Division of Corporations	
SUBJECT: Royal Oak Estates HO	DA, Inc.
(Name of Corpora	
DOCUMENT NUMBER: N26776	
The enclosed Resignation of Registered Agent for a Corpor	ration and fee are submitted for filir
Please return all correspondence concerning this matter to t	he following:
Lisa Weathers	
(Name of Person)	-
Leland Management	
(Name of Firm/Company)	_
6972 Lake Gloria Blvd	
(Address)	<del>-</del>
Orlando, FL 32809	
(City/State and Zip Code)	_
For further information concerning this matter, please call:	
Tanvir Hasan 407	258-4543
(Name of Person) at (Area Code	e & 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

**TO:** Amendment Section

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

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Fursuant to the provisions of sections $607.0502(2)$ , $617.0502(2)$ , $607.1509$ , of $617.1509$ .
Florida Statutes, the undersigned. Leland Management (Name of Registered Agent)
(Came at regarded regard
hereby resigns as Registered Agent for Royal Oak Estates HOA, Inc.
(Name of Corporation)
N26776
(Document Number, if known)
A copy of this resignation was mailed to the above listed corporation at its last known address.
The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.
(Signature of Resigning Agent)
If signing on behalf of an entity:
Rebecca Furlow
President (Capacity)  (Typed or Printed Name)  ALLAHASSI (Capacity)
President SS 2
(Capacity)
(capacity)
(Capacity)  SET CONTROL TO SET CONTR
\$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withdrawn corporation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