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Office Use Only

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FILED
2024 APR 18 PH 4: 45
2024 APR 18 PH 4: 45

## **COVER LETTER**

TO: Amendment Section
Division of Corporations

THE MEADOWS

SUBJECT: THE MEADOWS OF SUGAR MILL INC
(Name of Corporation)

DOCUMENT NUMBER: N36755

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)

Sentry Management, Inc.

(Name of Firm/Company)

2180 W. State Road 434, Suite 5000

(Address)

Longwood, FL 32779-5044

For further information concerning this matter, please call:

(City/State and Zip Code)

Darline Mendoza, Customer Experience (Name of Person) at (407 ) 788-6700 ext. 28115 (Area Code & Daytime Telephone Number)

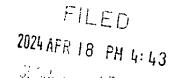
Enclosed is a check made payable to the Florida Department of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

**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



Pursuant to the prov	isions of sections 6	507.0502(2), 617.0502(2), 607.1509, or 61	7.1509,
Florida Statutes, the undersigned,		SENTRY MANAGEMENT INC	
	<i>U</i>	(Name of Registered Agent)	
hereby resigns as Re	egistered Agent for	THE MEADOWS OF SUGAR MI	LL INC
	<i>G</i>		ne of Corporation)
N36755			
(Document Nu	mber, if known)		
A copy of this resign	nation was mailed t	to the above listed corporation at its last kn	nown address.
The agency is terming this statement is file		e discontinued on the 31st day after the dat	e on which
<	<b>3</b>		
	(Si	ignature of Resigning Agent)	-
If signing on behalf	of an entity:		
	Bradley Pomp, or	n behalf of, Sentry Management, Inc.	
		(Typed or Printed Name)	_
		President	
_		(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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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