## N37891

(Requestor's Name)	
(Address)	
(Address)	
(Address)	
(City/State/Zip/Phone	#)
	_
PICK-UP WAIT	MAIL
(Business Entity Name	=)
(2-3	-,
(Document Number)	
Certified Copies Certificates of	of Status
577 677	
Special Instructions to Filing Officer:	
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Office Use Only



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07/07/23--01004--010 \*\*35.00

10/03/23--01/07--005 \*\*\$2.50

2023 SEP -5 PM 3: 50

RA Resignation

SEP 2 8 2023

D CUSHING

## **COVER LETTER**

TO: Amendment Section Division of Corporations	
SUBJECT: WCTORIA CHASE HE (Name of Corpo	OME OWNERS ASSOCIATION
DOCUMENT NUMBER: N 37 89	
The enclosed Resignation of Registered Agent for a Corp	poration and fee are submitted for filing.
Please return all correspondence concerning this matter	
PATRICIA PEREZ (Name of Person)	
VICTORIA CHASE HUMEOWNERS (Name of Firm/Company)	ASSOCIATION
6795 BRITTANY CH (Address)	ALE CT.
ORIANDO FL 32810 (City/State and Zip Code)	
For further information concerning this matter, please co	all:
PATRICIA PEREZ at (Area (Area (	7 791-9158  Code & Daytime Telephone Number
Enclosed is a check made payable to the Florida Depart or \$35.00 for an administratively dissolved, voluntarily	tment of State for \$87.50 for an active corporation dissolved or withdrawn corporation.
ALREADY PAID & 35.00	•
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



August 16, 2023

RAYMOND PEREZ VICTORIA CHASE HOMEOWNER'S ASSOCIATION P.O. BOX 608494 ORLANDO, FL 32860-8494

SUBJECT: VICTORIA CHASE HOMEOWNER'S ASSOCIATION, INC.

Ref. Number: N37891

We have received your document for VICTORIA CHASE HOMEOWNER'S ASSOCIATION, INC. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have completed the wrong form for a registered agent resignation. Please see the attached form and also the fees are different. We will need an additional \$52.50.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing Operations Manager A

SEP 0 5 2023

Letter Number: 223A00018870

## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607.0503(2), 617.0502(2), 607.1509, or 617.	.1509,
Florida Statutes, the undersigned, PATRICIA PEREZ (Name of Registered Agent)	
hereby resigns as Registered Agent for VICTOVIA CHASE HUMEOU (Name of Corporation)	INERS 1950CIATION
N 37891	
(Document Number, if known)	
A copy of this resignation was mailed to the above listed corporation at its last known	own address.
The agency is terminated and the office discontinued on the 31st day after the date this statement is filed.	on which
Patricia Pera (Signature of Regigning Agent)	o
If signing on behalf of an entity:	
(Typed or Printed Name)	· 2
(Typed of Timed Walle)	023 SEF
10/14	> UI
(Capacity)	PH II
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Fee for filing this document: \$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/voluntarily dissolved/voluntarily dissolved/voluntarily	S 4. 50 ed/
withdrawn corporation AUGANY PAIN \$35.0	\(\)
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Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314