

N44398

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

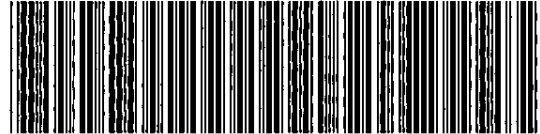
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PA
2009

TO: Amendment Section
Division of Corporations

DOCUMENT NUMBER: *N44398*

Please return all correspondence concerning this matter to the following:

Ocala, FL 34471
(City/State and Zip Code)

_____ at (352) 671-8203
(Name 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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
Post Office Box 6327
Tallahassee, FL 32314

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned, GARRY GRIFFIN BOSSHARDT
(Name of Registered Agent)

hereby resigns as Registered Agent for PELICAN COVE II PROPERTY MANAGEMENT
(Name of Corporation)

N 44 398
(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.

Garry H. Griffin
(Signature of Resigning Agent)

If signing on behalf of an entity:

BOSSHARDT Property management, inc.
(Typed or Printed Name)

MANAGER
(Capacity)

Fee for filing this document:

\$87.50 - Active corporation

\$35.00 - Administratively dissolved/voluntarily dissolved/
withdrawn corporation

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Tallahassee, FL 32314