N45729

(Re	questor's Name)	
- (Ad	dress)	
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(Cit	ry/State/Zip/Phone	; #)
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2119 JUL 31 PM 3: 30
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8/2/13

COVER LETTER

TO: Amendment Section Division of Corporations		
SUBJECT: Shoppes in Jacaranda Commerce Assocation In		
DOCUMENT NUMBER: $N45729$		
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:		
Barry Leth bridge (Name of Person)		
PA Lethbridge & Co (Name of Firm/Company)		
8551 W. Sunrue Blud #104 (Address)		
Plant Ation Fin 33322 (City/State and/Zip Code)		
For further information concerning this matter, please call:		
Range of Person) at (954) 424-7750 (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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

FILED .

RESIGNATION OF REGISTERED AGENT, PM 3: 30 FOR A CORPORATION 2013 JULY OF STATE OF ST

TALLAHASSEE. FLORING
Pursuant to the provisions of sections 607,0502(2), 617.0502(2), 607,1509, or 617.1509,
Florida Statutes, the undersigned, Barry Lethbruts Pres ALethbruts (Name of Registered Agent)
hereby resigns as Registered Agent for Shapes If Jacaranda Commerce Atour
N45729
(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) Pro PALeth bridge
(Signature of Resigning Agent)
If signing on behalf of an entity:
Barry Lethbribe
(Typed or Printed Name)
and the

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→ \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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

FILED RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 607:0502(2), 617.0502(2), 627.1509, or 617.1509 Florida Statutes, the undersigned, hereby resigns as Registered Agent for Sheppes 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. If signing on behalf of an entity.

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