## 79400000467

(Re	equestor's Name)	
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(Ci	ty/State/Zip/Phon	e #)
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## **COVER LETTER**

	vision of Corporations		
SUBJECT	. Valencia Pointe Homeow	ner's Asso	ciation, Inc.
SODJECT		ne of Corporation	on)
DOCUME	ENT NUMBER: N940000046	7 	
The enclos	ed Resignation of Registered Agent	for a Corpora	tion and fee are submitted for filing.
Please retu	irn all correspondence concerning th	is matter to th	e following:
Louis Ca	plan, Esquire		
	(Name of Person)		
Sachs Sa	ax Caplan, PL		
	(Name of Firm/Company)		
6111 Bro	oken Sound Parkway NW, #200		
	(Address)		
Boca Rat	ton, FL 33487		
	(City/State and Zip Code)		
For further	information concerning this matter,	, please call:	
CI	lara Garcia	561 at ( )	237-6839
	(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

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

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Pursuant to the provisions of sections	; 607.0502(2), 617.0502(2), 607.1509, or 617.1509,
Florida Statutes, the undersigned,	Sachs Sax Caplan
, <u> </u>	(Name of Registered Agent)
hereby resigns as Registered Agent for	Valencia Pointe Homeowner's Association, Inc.
	(Name of Corporation)
N00000467	
(Document Number, if known)	
A copy of this resignation was mailed	d to the above listed corporation at its last known address.
The agency is terminated and the offithis statement is filed.	ce discontinued on the 31st day after the date on which
	(Signature of Resigning Agent)
If signing on behalf of an entity:	
Sachs Sax Ca <sub>l</sub>	plan
-	(Typed or Printed Name)
Esquire / VP	2018
	(Capacity)
\$87.50 - A \$35.00 - A	ling this document: Active Corporation Administratively dissolved/voluntarily dissolved/

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314