N94000001455

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
(Only/State/Zip/Filone #)			
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Ra Resignation

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COVER LETTER

TO:	Amendment Section Date: 12/6/2023
	Division of Corporations
SUBJ	ECT: Magnolia Pointe Subdivision HOA
	(Name of Corporation)
DOC	UMENT NUMBER: N94000001455
The ea	nclosed Resignation of Registered Agent for a Corporation and fee are submitted for filing.
Please	e return all correspondence concerning this matter to the following:
Mary	Deibler
•	(Name of Person)
	Sentry Management, Inc.
	(Name of Firm/Company)
	2180 W. State Road 434, Suite 5000
-	(Address)
	Longwood, FL 32779-5044
	(City/State and Zip Code)
For fu	rther information concerning this matter, please call:
Mary	Deibler, Vice President, Client Ser at (407) 788-6700 ext. 28100 💥 🛱
	(Name of Person) (Name of Person) (Area Code & Daytime Telephone Number)
Enclo or \$35	sed is a check made payable to the Florida Department of State for \$87.50 for an active comoration 5.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.
Amen Divisi Cliftor 2661	Address: dment Section on of Corporations n Building Executive Center Circle hassee, 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 provisions of sections 607.0:	502(2), 617.0502(2), 607.1509, or 617.1509,		
Florida Statutes, the undersigned,	SENTRY MANAGEMENT INC		
•	(Name of Registered Agent)		
hereby resigns as Registered Agent for Ma	gnolia Pointe Subdivision HOA		
<i>, , , , , , , , , , , , , , , , , , , </i>	(Name of Corporation)		
N94000001455			
(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 disc this statement is filed.	continued on the 31st day after the date on which		
	<i></i>		
(Signature of Resigning Agent)			
If signing on behalf of an entity:			
Bradley Pomp, on beł	nalf of, Sentry Management, Inc.		
(Туре	d or Printed Name)		
ŗ	President Capacity) 7AN 30		
	ت ٠٠٠٠		
Fee for filing the \$87.50 - Active of \$35.00 - Administration	corporation		
\$33.00 - Admini	stratively dissolved/voluntarily dissolved/		

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

withdrawn corporation