

(Reau	estor's Name)	
V 4-	,	
(Addre	ess)	
(Addre	ess)	
(City/S	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busin	ess Entity Nar	me)
(Docu	ment Number)	
(5000	ment Namber)	
Certified Copies	Certificates	s of Status
Special Instructions to Fili	ing Officer:	

Office Use Only



200315273752

07/02/18--01015--007 **87.50

FILED

18 JUL-9 AH 8: 17

C912/1

DUL 10 2018

COVER LETTER

	nent Section n of Corporations		
subject:	nerald Cove at Cape Co		
	,	ne of Corporat	tion)
DOCUMENT	NUMBER: N95000002531	1	
The enclosed R	esignation of Registered Agent	for a Corpor	ration and fee are submitted for filing.
Please return al	correspondence concerning th	is matter to t	the following:
Dee Mas	sterson		
	(Name of Person)		=
Hayden	& Assoc		
	(Name of Firm/Company)		_
12650 W	/hitehall Dr		
-	(Address)		-
Ft Myers	s, FL 33907		
	(City/State and Zip Code)		-
For further info	rmation concerning this matter,	please call:	
Dee Mas	sterson	,239	489-4890 & Daytime Telephone Number)
	(Name of Person)	(Area Code	& Daytime Telephone Number)
Enclosed is a ch or \$35.00 for an	eck made payable to the Florid administratively dissolved, vo	a Departmen luntarily diss	at of State for \$87.50 for an active corporation of State for \$87.50 for an active corporation.

Mailing Address: Amendment Section Division of Corporations Post Office Box 6327 Tallahassee, FL 32314

CR2E046 (04/12)

Street Address:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

FILED

10 JUL -9 AM 5: 17

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION (AT 1)

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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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