N96000005301

(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	
Ų		
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
•		
, (Do	cument Number)	
Certified Copies	Certificates	s of Status
	_	
		
Special Instructions to	Filing Officer:	
		j



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SECRETARY OF STATE

Office Use Only

R.A. Resignation

TB 4-9-18

COVER LETTER

Divisio	on of Corporations					
SUBJECT:	Carriage Trail	Homeowners' As				
		•	corporanc	лі <i>)</i>		
DOCUMENT	'NUMBER:	N96000005301				
The enclosed I	Resignation of Regis	stered Agent for a	Corporat	tion and fee	are submitted for	or filing.
Please return a	II correspondence c	oncerning this ma	tter to the	e following:		
	Kenneth Kirkpat	rick				
	(Name of Per	son)				
	(Name of Firm/C	ompany)				
	2605 SW 33rd St		00			
	(Address))				
	Ocala, FL 34471					
	(City/State and Z	ip Code)				
For further info	ormation concerning	g this matter, plea	se call:			
	Joe Fante	at (352)	482-0777		
	(Name of Person)	(A	rea Code	& Daytime Te	elephone Number	r)

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

TO:

Amendment Section

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

Pursuant to the provision	ons of section	is 607.0502(2), 617.0502(2), 607	7.1509, or 617.1	.509,	
Florida Statutes, the und	dersigned, _	Kenneth Kirkpatrick (Name of Register	ed Agent)	 	
hereby resigns as Regis	tered Agent f	for <u>Carriage Trail Homeown</u> (Name of Corpo	ers' Associat oration)	ion, Ihc.,	
N9600000 (Document Number					
A copy of this resignation	on was maile	ed to the above listed corporation	at its last knov	vn address.	
The agency is terminate this statement is filed.	d and the off	ice discontinued on the 31st day	after the date o	on which 2008 APR -4	
If signing on behalf of a	in entity:	(Signature of Resigning Agent)			LED
<u>.</u>	Kenneth Ki	rkpatrick (Typed or Printed Name)		AM 11: 52 OF STATE	
I	Registered				
		(Canacity)			

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\$35.00 - Administratively dissolved/voluntarily dissolved/withdrawn corporation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