19700000 2703

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
J. HORNE APR - 8 2024		





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03/18/24--01008--028 **87.50



COVER LETTER

Date: 03/08/2024

TO:	Amendment Section		
	Division of Corporations		

SUBJECT: THE PRESERVE AT LANSBROOK INC
(Name of Corporation)

DOCUMENT NUMBER: N97000002703

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:

Darline Mendoza

(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 further information concerning this matter. please call:

Darline Mendoza, Customer Experience
(Name of Person)

at (407) 788-6700 ext. 28115
(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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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 FILED FOR A CORPORATION 2024 HAR 18 AM 4: 35

	2024 HAR 18 AM 4: 35
Pursuant to the provisions of sections 6	07.0502(2), 617.0502(2), 607.1509; 617.1509; FI CHIP!
Florida Statutes, the undersigned,	SENTRY MANAGEMENT INC (Name of Registered Agent)
hereby resigns as Registered Agent for	THE PRESERVE AT LANSBROOK INC (Name of Corporation)
N97000002703	
(Document Number, if known)	
A copy of this resignation was mailed t	to the above listed corporation at its last known address.
The agency is terminated and the office this statement is filed.	e discontinued on the 31st day after the date on which
(Si	ignature of Resigning Agent)
If signing on behalf of an entity:	
Bradley Pomp, or	n behalf of, Sentry Management, Inc.
	(Typed or Printed Name)
	President
	(Capacity)

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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