## N97000004363

| (Re                                     | questor's Name)  |             |
|---|------------------|-------------|
| (Address)                               |                  |             |
| DA)                                     | dress)           |             |
| (Cit                                    | y/State/Zip/Phon | e #)        |
| PICK-UP                                 | ☐ WAIT           | MAIL        |
| (Business Entity Name)                  |                  |             |
| (Document Number)                       |                  |             |
| Certified Copies                        | _ Certificate    | s of Status |
| Special Instructions to Filing Officer: |                  |             |
|   | 0.00             |             |
| MAK 10 LOLL                             |                  |             |
|   |                  |             |





900382665589

03/08/22--01018--007 \*\*35.00



## TRANSMITTAL LETTER

| TO:   | Amendment Section Division of Corporations                              | •   |
|---|---|---|
|   | Cypress Landing Homeowners' Asso  | vistion of Clermont. Inc                                    |
| CHD   | ••  | claim of Clerinoin, the                                     |
| 20R   | JECT:   | (Name of Corporation)                                       |
| DOC   | UMENT NUMBER:   |   |
| The c   | nclosed Officer/Director Resignation                                    | for a Corporation and fee are submitted for filing          |
| Please  | e return all correspondence concernir                                   | ig this matter to the following:                            |
| Joseph  | Morgan  |   |
|   | (1)   |   |
| _   | (Name of Person)  |   |
| Cypres  | s Landing Homeowners' Association of Clermont                           | , Inc   |
|   | (Name of Firm/Company)  |   |
| РО Во   | x 120669  |   |
|   |   |   |
|   | (Address)   |   |
| Clerme  | ont, Fl. 34712  |   |
|   | (City/State and Zip Code)   | <del></del>   |
| For fi  | urther information concerning this ma                                   | atter please call:  |
| 10110   | inter information concerning and inc                                    | mer, prouze carr.   |
| <br>د د   | Joseph Morgen   | at (8/2) 207-6963<br>(Area Code & Daytime Telephone Number) |
|   | (Name of Person)  | (Area Code & Daytime Telephone Number)                      |
| Enclo   | sed is a check for \$35.00 made payal                                   | ole to the Florida Department of State.                     |
|   | Martina Address   | Street Address:   |
|   | Mailing Address:  Amendment Section  Street Address:  Amendment Section |   |
| Division of Corporations Division of Corporations |   |   |
|   | P.O. Box 6327   | The Centre of Tallahassee                                   |
|   | Tallahassee, FL 32314   | 2415 N. Monroe Street, Suite 810                            |

Tallahassee, FL 32303

## OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

Cooke Listed IN 2012 MAR 48 PM 3:31

(Signature of resigning office /director)

## FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314