

N980000000477

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

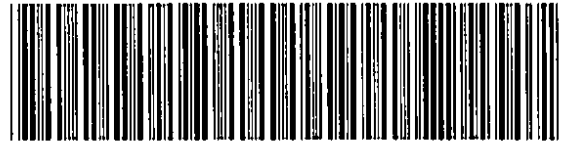
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
18 MAR 19 PM 1:17

Ra Resignation

MAR 19 2018

D CUSHING

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: JPO Condominium Association
(Name of Corporation)

DOCUMENT NUMBER: N98000000477

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Clayton matto
(Name of Person)

Leland management
(Name of Firm/Company)

6972 Lake Gloria Blvd
(Address)

Orlando, FL 32809
(City/State and Zip Code)

For further information concerning this matter, please call:

Angela Phillips at (321) 549-0721
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

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FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 6, 2018

851 - J.P.O. CONDI ASSOCIATION
6972 LAKE GLORIA BLVD
ORLANDO, FL 32809

SUBJECT: J.P.O. CONDOMINIUM ASSOCIATION, INC.
Ref. Number: N98000000477

This will acknowledge receipt of your correspondence which is being returned for the following reason(s):

We received the attached \$35.00 check without any supporting documents. You must submit the payment with the actual application to change the registered agent information with our office.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Diane Cushing
Senior Section Administrator

Letter Number: 518A00004515

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18 MAR 19 AM 11:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

\$ 87.50

**RESIGNATION OF REGISTERED AGENT
FOR A CORPORATION**

Pursuant to the provisions of sections 607.0502(2), 617.0502(2), 607.1509, or 617.1509,

Florida Statutes, the undersigned, Leland Management
(Name of Registered Agent)

hereby resigns as Registered Agent for J.P.O. Condominium Association
(Name of Corporation)

NA8000000477
(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 discontinued on the 31st day after the date on which this statement is filed.


(Signature of Resigning Agent)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

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DIVISION OF CORPORATIONS
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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