## PD4000128707

(Re	equestor's Name)	
(Ac	idress)	
(Ac	ddress)	
	ty/State/Zip/Phone #	
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PICK-UP	☐ WAIT	MAIL
		,
(Bı	usiness Entity Name)	1
(De	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	

Office Use Only



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05/30/12--01029--005 \*\*35.00

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## **COVER LETTER**

**TO:** Amendment Section Division of Corporations

SW FLORIDA PARADISE PROPERTY, INC.

**SUBJECT** 

(Name of Corporation)

DOCUMENT NUMBER: P04000128707

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:

## HERNAN PINEDA

(Name of Person)

SW FLORIDA PARADISE PROPERTY, INC

(Name of Firm/Company)

4645 SE 11TH PLACE, STE 103

(Address)

CAPE CORAL, FL 33904

(City/State and Zip Code)

For further information concerning this matter, please call:

HERNAN PINEDA

 $_{\rm at}(239)$ 

549-9949

(Name of Person)

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

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SEFFICIENCY OF RESING



May 31, 2012

HERNAN PINEDA 4645 SW 11TH PL, STE. 103 CAPE CORAL, FL 33904

SUBJECT: S.W.FLORIDA PARADISE PROPERTY INC

Ref. Number: P04000128707

We have received your document for S.W.FLORIDA PARADISE PROPERTY INC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

To resign as registered agent for an active corporation, the enclosed resignation form should be completed and returned with a filing fee of \$87.50.

There is a balance due of \$52.50.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Irene Albritton Regulatory Specialist II

Letter Number: 112A00015648

## 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, HERNAN PINEDA	
(Name of Registered Agent)	-
hereby resigns as Registered Agent for SW FLORIDA PARADISE PROPERTY, INC	
(Name of Corporation)	-
P04000128707	
(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.	
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(Signature of Resigning Agent)	
f signing on behalf of an entity:	
(Typed or Printed Name)	
	0
(Capacity)	DIVISION OF ST
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<u></u>	, <u>c</u>
Fee for filing this document:	~a
\$87.50 - Active corporation	正

\$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