## P08000011532

(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:	
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SECRETARY OF STATE



## **COVER LETTER**

SUBJECT: NEW HOME GALLERIA CORP (Name of Corporation)  DOCUMENT NUMBER: P08000077532	
00000077077	
The enclosed Resignation of Registered Agent for a Corporation and fee are submitted for fili	ng.
Please return all correspondence concerning this matter to the following:	
James Rose (Name of Person)	
New Home Galleria (Name of Firm/Company)	
PO Box 593604  (Address)	
Orlando FL 32859 (City/State and Zip Code)	
For further information concerning this matter, please call:	
James Rose at (407) 382-7400 (Area Code & Daytime Telephone Number)	

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

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

## 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, Name of Registered Agent)	
hereby resigns as Registered Agent for NEW HOME GALLERIA CORD (Name of Corporation)	
P08000077532	
(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:	
	ASE SE
(Typed or Printed Name)	سار نیا
(Capacity)	OF STATE

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\$87.50 - Active corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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