N05000/1774

| (Requestor's Name) | |
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| (City/State/2 | Zip/Phone #) |
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| (Business Entity Name) | |
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| (Document Number) | |
| Certified Copies Co | ertificates of Status |
| Special Instructions to Filing Officer: | |
| 9/29 | |
| | \$35.00 |

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FLORIDA DEPARTMENT OF STATE Division of Corporations

September 2, 2021

Ν.

ATTN:SASHA L. EASTBURN 5365 EAST COUNTY HWY 30A SUITE 105 SANTA ROSA BEACH, FL 32459

SUBJECT: ENCLAVE HOMEOWNERS ASSOCIATION OF FREEPORT, INC. Ref. Number: N05000011774

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The document must have original signatures.

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.

Darlene Connell Regulatory Specialist II Supervisor

Letter Number: 821A00021274

Elease see attached.



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2021 JUN 29 PH 2:19

FLORIDA DEPARTMENT OF STATE Division of Corporations

June 17, 2021

ATTN:SASHA L. EASTBURN 5365 EAST COUNTY HWY 30A SUITE 105 SANTA ROSA BEACH, FL 32459

SUBJECT: ENCLAVE HOMEOWNERS ASSOCIATION OF FREEPORT, INC. Ref. Number: N05000011774

We have received your document for ENCLAVE HOMEOWNERS ASSOCIATION OF FREEPORT, INC., however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$35.00.

The fee to resign as officer/director for a corporation is \$35 per person resigning.

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.

SASHA B PENNYWELL Regulatory Specialist II

Letter Number: 621A00013651

TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT: ENCLAVE HOMEOWNERS ASSOCIATION OF FREEPORT, INC. (Name of Corporation)

DOCUMENT NUMBER: N05000011774

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

Please return all correspondence concerning this matter to the following:

SASHA L. EASTBURN, Esq.

(Name of Person)

EASTBURN LAW FIRM, PA

(Name of Firm/Company)

5365 EAST COUNTY HWY 30A, SUITE 105

(Address)

SANTA ROSA BEACH, FL 32459 (City/State and Zip Code)

For further information concerning this matter, please call:

<u>SASHA L. EASTBURN</u> at (<u>850</u>) <u>260-3332</u> (Name of Person) (Area Code & Daytime Telephone Number)

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

<u>Mailing Address:</u> Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>Street Address:</u> Amendment Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 DocuSign Envelope ID: AA026D1F-D078-4858-A49A-67539490DA8D

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

I. IOHN WITHERSPOON

, hereby resign as <u>SECRETARY/TREASURER</u> (Title)

ENCLAVE HOMEOWNERS ASSOCIATION OF FREEPORT, INC (Name of Corporation) ot

-

, a corporation organized under the laws of the State of N05000011774 (Document Number, if known)

FLORIDA

DocuSigned by: F 7 1414AEE4553C487 ... resigning officer/director) (Signature thank

FILING FEE IS \$35.00

