# N17000001103

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#### **COVER LETTER**

Division of Corporations		
Redhawk Homeowners Associa SUBJECT:	tion, Inc.	
3003201	(Name of Corpor	ation)
DOCUMENT NUMBER: N1700000110	)3	
The enclosed Resignation of Registere	ed Agent for a Corpo	oration and fee are submitted for filing.
Please return all correspondence conce	erning this matter to	the following:
Gris Romero		
(Name of Person)	)	<b></b>
Evergreen Lifestyles Management LLC		
(Name of Firm/Comp	pany)	<del>.</del>
270 W. Plant St., Ste 340		
(Address)		_
Winter Garden, FL 34787		
(City/State and Zip C	ode)	_
For further information concerning thi	s matter, please call	:
Gris Romero	321 at ( ;	558-6511
(Name of Person)	(Area Co	de & 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.

#### **Mailing Address:**

TO: Amendment Section

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

#### **Street Address:**

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

CR2E046 (12/19)

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## RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of section	ons 607.0503(2), 617.0502(2), 607.1509, or 617.1509.	
Florida Statutes, the undersigned. Evergreen Lifestyles Management LLC		
	(Name of Registered Agent)	
hereby resigns as Registered Agen	Redhawk Homeowners Association, Inc.	
	(Name of Corporation)	
N17000001103		
(Document Number, if known)	<del></del>	
A copy of this resignation was ma	iled to the above listed corporation at its last known address.	
The agency is terminated and the othis statement is filed.	office discontinued on the 31st day after the date on which	
	(Signature of Resigning Agent)	2022
If signing on behalf of an entity:		2022 MOV 22
Gris Romero		<u> </u>
	(Typed or Printed Name)	5: 07
Executive Director	of Support Services	-
·	(Capacity)	

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\$87.50 - Active Corporation \$35.00 - Administratively dissolved/voluntarily dissolved/ withdrawn corporation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