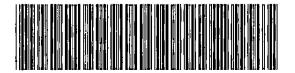
N17 00000 4245

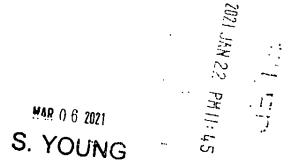
(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
(,
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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COVER LETTER

Division of Corporations SUBJECT: The Grove at Bannon Lakes Homeowners Association, Inc. (Name of Corporation) N17000004245 DOCUMENT NUMBER:____ 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: Patti Ferris (Name of Person) Evergreen Lifestyles Management LLC (Name of Firm/Company) 2100 S Hiawassee Rd (Address) Orlando, FL 32835 (City/State and Zip Code) For further information concerning this matter, please call: at (321) 558-6502 (Area Code & Daytime Telephone Number) Patti Ferris (Name of Person)

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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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

Amendment Section

TO:

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

RESIGNATION OF REGISTERED AGENT FOR A CORPORATION

Pursuant to the provisions of sections 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 Agent for The Grove at Bannon Lakes Homeowners A	Association, Inc.
(Name of Corporation)	
N17000004245	
(Document Number, if known)	
A copy of this resignation was mailed to the above listed corporation at its last kno	wn address.
The agency is terminated and the office discontinued on the 31st day after the date this statement is filed.	on which
Patti Ferris	
(Signature of Resigning Agent)	20
If signing on behalf of an entity:	202! JAN 22
	AR C
Patti Ferris	12
(Typed or Printed Name)	· "0
	PH 11: 4:5
Executive Director Support Services	1 ,5
(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, F4. 32314

	Page _ <u>1</u> of _	3
CHECK REQUEST	INVOICE	
	DATE: INVOICE # DUE DATE:	1/18/2021 1182021 1/20/2021
Florida Department of State		
Div of Corporations, P O Box 6327, Tallahassee, FL 32314		
Association		
1157 Grove at Bannon Lakes		
	- + , , , , , ¹ • ,	
Resignation of Registered Agent	1999	\$ 87.50
Р	lease remember to attac	h all receipts!
Mo	TOTAL DUE	\$ 87.50

Authorized by:

TOTAL DUE \$ 87.50