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APR 1 5 2020 S. YOUNG



April 3, 2020

PATTI FERRIS EVERGREEN LIFESTYLES MANAGEMENT, LLC 2100 S HIAWASSEE ROAD ORLANDO, FL 32835

SUBJECT: HIDDEN LAKES NORTH HOMEOWNERS ASSOCIATION, INC.

Ref. Number: N18000004851

We have received your document for HIDDEN LAKES NORTH HOMEOWNERS ASSOCIATION, INC. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

PATTI FERRIS IS NOT LISTED AS REGISTERED AGENT

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.

Letter Number: 920A00007216

Shelia H Young Regulatory Specialist II

COVER LETTER

TO:	Amendment Section Division of Corporations
SUBJI	ECT: Hidden Lakes North Homeowners Association, Inc (Name of Corporation)
DOCL	JMENT NUMBER: N18000004851
	iclosed 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)
Ever	green Lifestyles Management, LLC
-	(Name of Firm/Company)
2100	S Hiawassee Road
-	(Address)
Orlan	ido, FL 32835
	(City/State and Zip Code)
For fu	rther information concerning this matter, please call:
P	(Name of Person) at (321) 558-6502 (Area Code & Daytime Telephone Number)
	(Name of Person) (Area Code & Daytime Telephone Number)

Mailing Address:

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 p	rovisions of sections 607.0503(2), 617.0502(2),	607.1509, or 617.1509,	
Florida Statutes.	the undersigned. Patti Ferris		
	(Name of	Registered Agent)	
hereby resigns as	Registered Agent for Hidden Lakes North Hor	neowners Association, Inc.	
	(Name of C	orporation)	
N18000004851			
(Document	Number, if known)		
A copy of this res	signation was mailed to the above listed corpora	tion at its last known address.	
The agency is ter this statement is	minated and the office discontinued on the 31st filed.	day after the date on which	
	Patti Ferris		
	(Signature of Resigning Agent)		
If signing on beh	alf of an entity:	2021	
			Π
	Evergreen Lifestyles Managemen	2020 APR 14	23 E3
	(Typed or Printed Name)	285五	
	Executive Director of Support Services	AM 8: 54	-
	(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