

N180000 10828

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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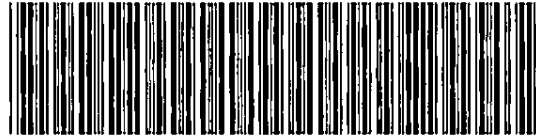
(Business Entity Name)

(Document Number)

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ALBRITTON

## COVER LETTER

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Southampton Lakes Homcowners Association, Inc.  
(Name of Corporation)

**DOCUMENT NUMBER:** N18000010828

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:

Patti Ferris

(Name of Person)

at ( 321 )

558-6502

(Area Code & 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of State for \$87.50 for an active corporation or \$35.00 for an administratively dissolved, voluntarily dissolved or withdrawn corporation.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:**

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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 15, 2021

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

SUBJECT: SOUTHAMPTON LAKES HOMEOWNERS ASSOCIATION, INC.  
Ref. Number: N18000010828

We have received your document for SOUTHAMPTON LAKES 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):

A wet signature is required for Non Profit corporation as a computerized signature is not acceptable.

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.

Irene Albritton  
Regulatory Specialist II

Letter Number: 221A00001070

**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 Southampton Lakes Homeowners Association, Inc.

(Name of Corporation)

N18000010828

(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:

Patti Ferris

(Typed or Printed Name)

Executive Director 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