P95000089580

(Requestor's Name)
(Address)
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TRANSMITTAL LETTER

TO: Amendment Section Division of Corporations

SUBJECT:	EVERGLADES MANAGEMENT, INC.				
SUBJECT:		(Name of	Corporati	on)	
DOCUMENT	NUMBER:	89580		· · · · · · · · · · · · · · · · · · ·	
The enclosed C	Officer/Director Resigna	ation for a Corp	oration a	nd fee are submitted for filing	
Please return al	l correspondence conce	erning this matt	er to the	following:	
PETER LIPIN	SKI				
	(Name of Person)			
SOUTHEASTI	ERN COLLEGE				
	(Name of Firm/Comp	pany)			
300 ROYAL C	OMMERCE ROAD				
	(Address)				
ROYAL PALM	M BEACH, FL 33411				
	(City/State and Zip C	lode)			
For further info	rmation concerning thi	is matter, please	call:		
JAMES WALI		95 at (4	557-6543	
	(Name of Person)	(Are	:a Code &	: Daytime Telephone Number)	
Enclosed is a cl	neck for \$35.00 made p	payable to the FI	orida De	partment of State.	
Mailing /			treet <u>A</u> ddr		
			Amendment Section		
P.O. Bo	-		Division of Corporations The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

OFFICER / DIRECTOR RESIGNATION FOR A CORPORATION

PETER LIPINSKI	TREASURER, hereby resign as			
		(Title)		
EVERGLADES MANAGEMENT, IN				
(Name of	Corporation)			
P95000089580	a corporation organized unde	er the laws of the State of		
(Document Number, if known)				
FLORIDA				
	Ren &	2022 SEP 26 PI		
(Sig	nature of resigning officer/director	PH 12: 36		

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section Division of Corporations P.O. Box 6327

Tallahassee, Florida 32314