L0300048456

(Re	equestor's Name)	
(Ad	ddress)	
(Ad	ddress)	
(Ci	ty/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(Ві	usiness Entity Name)	
(De	ocument Number)	
Certified Copies	_ Certificates of	Status
Special Instructions to	Filing Officer:	
:	Office Use Only	-



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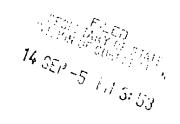
Raginshm 100 9.11.14

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Homestead Plaza Group, L	LC
+wo (z) (Name of Lin	mited Liability Company)
The enclosed/member, resignation or dissoc	ciation and fee(s) are submitted for filing.
Please return all correspondence concerning	g this matter to:
Charlotte Bailey	
(Contact Person)	
Homestead Plaza Group	
(Firm/Company)	
5621 Strand Blvd, Suite 211C	
(Address)	
Naples, FL 34110	
(City/State and Zip Code)	
For further information concerning this mat	ter, please call:
Charlotte Bailey	239 262-3034
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable \$25 Filing Fee 250:00	to the Florida Department of State for: □ \$55 Filing Fee & Certified Copy
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations Clifton Building	Division of Corporations P.O. Box 6327
2661 Executive Center Circle	Tallahassee, Florida 32314
Tallahassee, Florida 32301	rananassee, Fiorida 32314

CR2E079 (2/14)





FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

(Pursuant to 605.0216, Florida Statutes)

	limited liability company as it appears on the records of the Florida Department nestead Plaza Group, LLC
2. The Florida doc L0300004845	ument/registration number assigned to this limited liability company is:
3. The date this me	mber/manager withdrew/resigned or will withdraw/resign is: 8/15/14
	tzgerald, hereby withdraw/resign as a
Managing Me	
	(Print Title)
of this limited lia resignation in wr	bility company and affirm the limited liability company has been notified of my iting.
Signature of D	ssociating Member or Resigning Manager
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)