W06000004393

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

W06-4393

# COVER LETTER

**TO:** Registration Section
Division of Corporations

**SUBJECT:** HOME REALTY LLC
(Name of Limited Liability Company)

Dear Sir or Madam:

The enclosed Resignation of Member, Managing Member or Manager and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

RAFAEL SALGADO
(Name of Person)

HOME REALTY LLC
(Firm/Company)

915 SAVANNAH FALLS DR.
(Address)

WESTON,FL.33327
(City/State and Zip Code)

For further information concerning this matter, please call:

RAFAEL SALGADO at ( 954 ) 385-0198
(Name of Person) (Area Code & Daytime Telephone Number)

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2006 MAY 31 PM 3: 33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**STREET/COURIER ADDRESS:**
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

**MAILING ADDRESS:**
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

***Enclosed is a check for the following amount:***

☑ $25 Filing Fee

☐ $55 Filing Fee & Certified Copy

CR2E079 (8/05)

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

# RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, RAFAEL SALGADO, hereby resign as MGRM
(Title)

of HOME REALTY LLC,
(Limited Liability Company)

a limited liability company organized under the laws of the State of FLORIDA,

and affirm that the limited liability company has been notified in writing of the resignation.

(Signature of resigning manager, managing member or member)

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2006 MAY 31 PM 3:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

## FILING FEE IS $25.00

**Make checks payable to Florida Department of State and mail to:**
**Division of Corporations**
**P.O. Box 6327**
**Tallahassee, FL 32314**

CR2E079 (8/05)