

2023 FOREIGN LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M2000000672

Entity Name: HOMENET, LLC

Current Principal Place of Business:

6205 PEACHTREE DUNWOODY ROAD
ATLANTA, GA 30328

Current Mailing Address:

6205-A PEACHTREE DUNWOODY ROAD
ATLANTA, GA 30328 US

FEI Number: 27-4013226

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	PRESIDENT	Title	VICE PRESIDENT, TREASURER
Name	ROWLEY, STEPHEN M.	Name	FRIEDMAN, MARIA L.
Address	6205 PEACHTREE DUNWOODY ROAD	Address	6205 PEACHTREE DUNWOODY ROAD
City-State-Zip:	ATLANTA GA 30328	City-State-Zip:	ATLANTA GA 30328
Title	SECRETARY	Title	VICE PRESIDENT
Name	HIGHTOWER, JENNIFER	Name	BOWSER, MARK F.
Address	6205 PEACHTREE DUNWOODY ROAD	Address	6205 PEACHTREE DUNWOODY ROAD
City-State-Zip:	ATLANTA GA 30328	City-State-Zip:	ATLANTA GA 30328
Title	VICE PRESIDENT	Title	ASSISTANT SECRETARY
Name	SIEGEL, REBECCA L.	Name	AVILA, LUIS A
Address	6205 PEACHTREE DUNWOODY ROAD	Address	6205 PEACHTREE DUNWOODY ROAD
City-State-Zip:	ATLANTA GA 30328	City-State-Zip:	ATLANTA GA 30328
Title	MEMBER		
Name	VINSOLUTIONS, INC.		
Address	6205 PEACHTREE DUNWOODY ROAD		
City-State-Zip:	ATLANTA GA 30328		

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: LUIS A. AVILA

ASSISTANT SECRETARY 04/26/2023

Electronic Signature of Signing Authorized Person(s) Detail

Date