

F160000001382

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

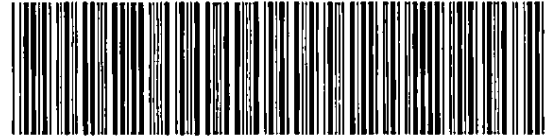
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100396695841

resolution withdrawing
alternate name

2022 DEC -9 AM 8:41

FILED

RECEIVED

2022 DEC -8 PM 12:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

A. RAMSEY

DEC 13 2022

\$02250, 02345, 00524, 0067)



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 9, 2022

SUNSHINE STATE CORPORATE COMPLIANCE COMPANY

TALLAHASSEE, FL 32312

SUBJECT: HOMELIFE CAPITAL INC
Ref. Number: F16000001382

CORRECTED
Please Allow For
Same File Date

We have received your document for HOMELIFE CAPITAL INC and the authorization to debit your account in the amount of \$35.00. However, the document has not been filed and is being returned for the following:

A foreign corporation can cancel an alternate name used for transacting business or conducting affairs in Florida if its actual name is available by submitting a resolution of the board of directors dropping the alternate name. The resolution should be signed by an officer or director of the corporation. A filing fee of \$35 should be submitted with the resolution.

I have enclosed the correct form. Please file the resolution dropping the alternate name instead of filing the amendment.

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) 245-6823.

Annette Ramsey
OPS

Letter Number: 422A00027417

RECEIVED
2022 DEC 12 AM 10:36
TALLAHASSEE, FLORIDA

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive, Tallahassee, Florida 32312

(850) 656-4724

DATE 12/08/2022

****WALK IN****

ENTITY NAME Homelife capital Inc

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

XXXXX

Plain Copy

Certified Copy

Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certificate of Good Standing

****APOSTILLE' / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$35

ACCOUNT #: I20160000072

S. R. J. W.

Please call Tina at the above number for any issues or concerns. Thank you so much!

COVER LETTER

TO: Amendment Section Division of Corporations

SUBJECT: Homelife Mortgage Corp

Name of Corporation

DOCUMENT NUMBER: F16000001382

Please return all correspondence concerning this matter to the following:

P Bryson

Name of Contact Person

Harbor Compliance

Firm/Company

1830 Colonial Village Lane

Address

Lancaster, PA 17601

City/State and Zip Code

corporate@harborcompliance.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

P Bryson

at (717) 946-9467

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$35 Filing Fee

☐ \$43.75 Filing Fee &
Certificate of Status

☐ \$43.75 Filing Fee &
Certified Copy

☐ \$52.50 Filing Fee,
Certificate of Status &
Certified Copy

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

FILED

2022 DEC -9 AM 8:41



FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

**RESOLUTION OF THE BOARD OF DIRECTORS TO WITHDRAW
THE ALTERNATE NAME FOR USE IN FLORIDA**
(Pursuant to section 607.1506 or 617.1506, F.S.)

(Please print or type)

I, the undersigned Darrin Seppinni, do hereby certify
(Name)

that this Resolution of the Board of Directors of _____
Homelife Mortgage Corp
(Name of Corporation)

a corporation duly organized and existing under the laws of CA,
(State or Country)

was adopted on 12/09/2022 withdrawing the alternate

name of HOMELIFE CAPITAL INC
(Current Alternate Name)

in Florida as its real name is available in Florida.

Date: 12/09/2022

/s/ Darrin Seppinni
Signature of Chairman, Vice Chairman of the Board, a
director or any officer

President

Title of person signing

FILING FEE \$35
Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314