## 0200025153

(Requestor's Name)  4742 N.E. DM AVE.  (Address)  (Address)  (Address)	33 4 800040204448
(City/State/Zip/Phone #)	
(Business Entity Name)	08/16/0401049803 **25.00
(Document Number)  Certified Copies Certificates of Status	,
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## RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I, MOMO SERVICE, INC	, hereby resign	as MANAGING MEMBER
77	J.,, G	(Title)
of Hometeam services, 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 bee	n notified in w	riting of the resignation.
M. M	4	
(Signature of resigning manager, m	anaging memb	er or member)

## 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

SECHETARY OF STATE

INC 16 WHII: