# 

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	<del>9 #)</del>
PICK-UP	WAIT	☐ MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		1
		$\mathcal{A}_{\alpha}$
		War
	Office Use On	,, /\ <b>V</b>



## **COVER LETTER**

Division of Corporations	
SUBJECT: Homestead 2 LLC (Name of Lim	Dawman + # L03000022803
Dear Sir or Madam:	
The enclosed Resignation of Member, Managing	Member or Manager and fee(s) are submitted for f
Please return all correspondence concerning this	matter to the following:
Genaro Diaz	
(Name of Person)	<del></del>
Homestead 2 LLC	
(Firm/Company)	·
601 Brickell Key Dr., Ste # 604	
(Address)	
Miami, FL 33131-2649	
(City/State and Zip Code)	
For further information concerning this matter, p	lease call:
Genaro Diaz	at ( 305 ) 860-3091
(Name of Person)	(Area Code & Daytime Telephone Number)
STREET/COURIER ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations	Division of Corporations
Clifton Building	P.O. Box 6327
2661 Executive Center Circle Tallahassee, Florida 32301	Tallahassee, Florida 32314
Enclosed is a check for the following amount:	
<b>X</b> \$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, Anuar Charfen	, hereby resign as Manager
	(Title)
of Homestead 2 LLC	
(Limited	Liability Company)
a limited liability company organized under t	he laws of the State of Florida ,
and affirm that the limited liability company	has been notified in writing of the resignation.
(Sint Sui	7 67
(Signature of resigning man	ager, managing member 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