L04000002108

| (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: |
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| |

Office Use Only



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SECRETARY OF STATE
ALLAHASSEF FI OR IN.

JUL 1 4 2009 EXAMINER



HQM OF TARPON SPRINGS, LLC

June 29, 2009

VIA OVERNIGHT MAIL

Department of State Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

RE:

Entity:

HQM of Tarpon Springs, LLC

Document#:

L04000002108

Dear Sir/Madam:

Please accept this letter as notification that we would like to voluntarily dissolve the above mentioned entity. Please see enclosed check # 1110 to cover the expense of \$25.00 to dissolve the above mentioned entity.

If you have any questions, or require any additional information please do not hesitate to contact me.

Best Regards,

Jazzinine Scott Legal Assistant Home Quality Management, Inc.

/jjs

COVER LETTER

| TO: Registration Section Division of Corporations | |
|---------------------------------------------------------|-----------------------------------------------------------------------------|
| SUBJECT: HQM of Tarpon Sprin | gs, LLC |
| | imited Liability Company) |
| | |
| The enclosed Articles of Dissolution and fee(s) are sul | omitted for filing. |
| Please return all correspondence concerning this matter | er to the following: |
| • • • • • • • • • • • • • • • • • • • • | |
| Ms. Jazzmine Scott | (Name of Person) |
| | |
| Home Quality Manager | nent, Inc. (Firm/Company) |
| | · · · |
| 4225 East Main Street | (Address) |
| l!t Fl! 20450 | (Addices) |
| Jupiter, Florida 33458 | y/State and Zip Code) |
| (, | , |
| For further information concerning this matter, please | call: |
| Jazzmine Scott | at (561) 366-6600 |
| (Name of Person) | (Area Code & Daytime Telephone Number) |
| Enclosed is a check for the following amount: | |
| \$25.00 Filing Fee 30.00 Filing Fee & | \$55.00 Filing Fee & \$60.00 Filing Fee, |
| Certificate of Status | Certified Copy (additional copy is enclosed) Certified Copy Certified Copy |
| | (additional copy is enclosed) |
| | |
| MAILING ADDRESS: Registration Section | STREET/COURIER ADDRESS: Registration Section |
| Division of Corporations | Division of Corporations |
| P.O. Box 6327 Tallahassee, FL 32314 | Clifton Building 2661 Executive Center Circle |

Tallahassee, FL 32301

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

| SECRET ALLAH |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| and assigned 3 Sylvania number |
| y company's dissolution pursuant to section |
| ved pursuant to the provisions of |
| pility company have been paid or discharged. gations and liabilities pursuant to s. 608.4421. g its members in accordance with their respective y court. n of any judgment, order or decree which may be |
| nip interests necessary to approve the dissolution: |
| Printed Name |
| By: Home Quality Management, Inc. |
| its sole member |
| By: Paul M. Walczak, |
| Chief Executive Officer |
| |

FILING FEE: \$25.00