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(Re	equestor's Name)	······=
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PICK-UP		MAIL
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COVER LETTER

TO: **Registration Section Division of Corporations**

Home Trust Solutions, LLC SUBJECT: (Name of Limited Liability Company)

Dear Sir or Madam:

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The enclosed Resignation of Member, Managing Member or Manager and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jonathan Coffman (Registered Agent)

(Name of Person)

Home Trust Solutions, LLC

(Firm/Company)

1612 Nature Court

(Address)

Palm Beach Gardens, FL 33410

(City/State and Zip Code)

For further information concerning this matter, please call:

Jonathan Coffman (Name of Person)

at (954) 536-7692 (Area Code & Daytime Telephone Number)

STREET/COURIER ADDRESS:

Registration Section **Division of Corporations** Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301

Enclosed is a check for the following amount:

✓\$25 Filing Fee

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 2005 JAN -6 AM 11: 09

\$55 Filing Fee & Certified Copy

CR2E079 (8/05)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER

I,	Erin A. Lowry	_, hereby resign as _	Manager (Title)	<u>· </u>
of	Home Trust Solutions, LLC			
	(Limited Liability	y Company)		/
a limi	ted liability company organized under the law	s of the State of	Florida	•.
and af	firm that the limited liability company has bee (Signature of resigning manager, m	hanaging member or		DIVISION OF CORPORATION 2005 JAN -6 AM 11:09
	FILING FEE	IS \$25.00		141 141 15
	Make checks payable to Florida De Division of Cor P.O. Box	porations	mail to:	v ⊁

Tallahassee, FL 32314

CR2E079 (8/05)

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