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(Do	cument Number)	·
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Certified Copies	Certificates of Status	
Special Instructions to	Filing Officer:	
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W 59617

COVER LETTER

TO: Registration Section	
Division of Corporations	
SUBJECT: Home Solutions Group of Fl	orida. LLC
(Name of Limited Liab	<u> </u>
The enclosed member, managing member or managiling.	ger resignation and fee(s) are submitted for
Please return all correspondence concerning this ma	atter to:
Gust G. Sarris	
(Contact Person)	
Keystone Law Group, P.L.	
(Firm/Company)	
1665 Kingsley Ave, Ste 108	
(Address)	
Orange Park, FL 32073	
(City/State and Zip Code)	
For further information concerning this matter, plea	se call:
Gust G. Sarris	904 \ 541-1643 \ \ \frac{100}{200} \ \frac{100}{
(Name of Contact Person) (Are	ea Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Find \$25 Filing Fee	S55 Filing Fee & Certified Copy
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 32314
Tallahassee, Florida 32301	

CR2E079 (5/06)



FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

RESIGNATION OF MEMBER, MANAGING MEMBER OR MANAGER FROM FLORIDA OR FOREIGN LIMITED LIABILITY COMPANY

1. The name of the limited liability company as it ap of State is: Home Solutions Grou		
2. This limited liability company was organized und Florida	er the laws of:	
3. The Florida document/registration number of this L06000089617	limited liability company is:	
4. I, David Bozik (Print Name of Person Resigning)	, hereby resign as a Manager (Print Title)!	
of this limited liability company and affirm the lim resignation in writing.	HAY - I	
Signature of Resigning Member, Managing Memb	er or Manager	Ì
Filing Fee: \$25.00 (Required)		

Certified Copy: \$30.00 (Optional)