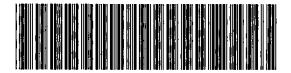
## L06000107557

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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Codified Conice Codification of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

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SECRETARY OF STATE AND AHASSEF FI ORIO

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## **COVER LETTER**

Division of Corporations
SUBJECT: HOC LLC (Name of Limited Liability Company)
The enclosed member, resignation or dissociation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
Robert Meringo (Contact Person)
HOC LLC (Firm/Company)
(Firm/Company)  351 N. Tessien dr. 18  (Address)
57 PeTe Bch FL 33706  (City/State and Zip Code)
For further information concerning this matter, please call:
Robert Meringo at (727) 365-2811 (Name of Contact Person) (Area Code & Daytime Telephone Number)
(Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for:  \$\sum_\$\$25 \text{Filing Fee & Certified Copy}\$\$
STREET/COURIER ADDRESS: MAILING ADDRESS:

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

TO: Registration Section

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E079 (2/14)



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

(Pursuant to 605.0216, Florida Statutes)

1. The name of the	ne limited liability company as it appears on the records of the Florida I	јераптен:
of State is:	HDC, LLC	·
2. The Florida do	ocument/registration number assigned to this limited liability company i	s:
L060	000107557	
3. The date this r	nember/manager withdrew/resigned or will withdraw/resign is:	18/14
4. I, <u>Rober</u> (Prin	T J MCRINGO, hereby withdraw/resign as a Name of Person Resigning)	
MANA	9 CR. (Print Title)	
of this limited l resignation in v	iability company and affirm the limited liability company has been noti vriting.	fied of my
Ra	lut Mering	
	Dissociating Member or Resigning Manager	
Filing Fee:	\$25.00 (Required)	~ <u>÷</u> 4

Certified Copy:

\$30.00 (Optional)