

LO7 0000 21655

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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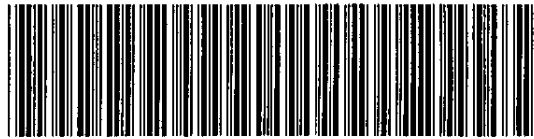
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

T. CLINE

DEC - 2 2008

EXAMINER

Welt & Rheaume, P.A.

Attorneys at Law

4770 Hollywood Boulevard
Hollywood, Florida 33021

Telephone: (954) 966-4646
Facsimile: (954) 966-4642
Toll Free: (866) LAW.4770
weltandrheaume.com

November 19, 2008

**CERTIFIED MAIL/RETURN
RECEIPT REQUESTED
7008 1140 0004 1682 8071**

Amendment Section
Division of Corporations
PO Box 6327
Tallahassee, FL 32314

Re: HOUSEWORKS DESIGN CENTER LLC.
Document No.: L07000021655

Dear Sir/Madam:

It has come to our attention that Philip J. Deberardimis, manager for Houseworks Design Center LLC., fraudulently indicated Welt and Rheaume, P.A. as registered agent for Houseworks Design Center LLC.

Therefore, enclosed please find a cover letter, Resignation of Registered Agent for a Limited Liability Company, and a check in the amount of \$25. We would ask that you please process this resignation immediately.

Upon receipt and review, if you have any questions, do not hesitate to contact me.

Very truly yours,

Daniel J. Rheaume

DJR/rpd
Enclosure(s)

Cc: Paul Gamm
Phil Deberardinis

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: Houseworks Design Center LLC.
(Name of Limited Liability Company)

DOCUMENT NUMBER: L070000 21655

The enclosed Resignation of Registered Agent for a Limited Liability Company and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Daniel J. Rheume
(Name of Person)

Welt and Rheume, P.A.
(Name of Firm/Company)

4770 Hollywood Blvd
(Address)

Hollywood, FL 33021
(City/State and Zip Code)

For further information concerning this matter, please call:

Daniel J. Rheume at (954) 966-4646
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET ADDRESS:
Amendment Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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TALLAHASSEE, FLORIDA

RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisions of section 608.416(2) or 608.509, Florida Statutes, the undersigned,

Welt and Rheaume, P.A.

(Name of Registered Agent)

Registered Agent for Houseworks Design Center LLC.

(Name of Limited Liability Company)

L07000021655

(Document Number, if known)

A copy of this resignation was mailed to the above listed limited liability company at its last known address.

The agency is terminated and the office discontinued on the 31st day after the date on which this statement is filed.


(Signature of Resigning Agent)

If signing on behalf of an entity:

(Typed or Printed Name)

(Capacity)

FILING FEES:

\$ 85.00	Active limited liability company
\$ 25.00	Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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