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SECRETARY OF STATE.

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COVER LETTER

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TO: Registration Section Division of Corporations			
SUBJECT: Associated Home	Solutions Realty LLC		
	Name of Limited Liability Cor	npany)	
The enclosed member, resignation	or dissociation and fee(s	s) are submitted for fil	ling.
Please return all correspondence c	oncerning this matter to:		
Wendy Wilson			
(Contact Person	1)	_	
Associated Home Solutions Re	ealty LLC		
(Firm/Company	')	_	
5976 20th Street #226			
(Address)		_	
Vero Beach, FL 32966			
(City/State and Zip	Code)	_	2015 SEC
For further information concerning	g this matter, please call:		AHA AHA
Danielle Vosburgh	561	776-7006	21 SSEE
(Name of Contact Person)	(Area Code	& Daytime Telephone	Number) U
Enclosed please find a check made \$25 Filing Fee		Department of State for g Fee & Certified Cop	يعيد وتارسب

STREET/COURIER ADDRESS:

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

CR2E079 (2/14)

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MAILING ADDRESS:

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



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)

2. The Florida document/registration number assigned to this limited	l liability company is:
L08000006673	
3. The date this member/manager withdrew/resigned or will withdra	w/resign is:
0: 1 5	
4. I, Stephen Denny , hereby withdra (Print Name of Person Resigning)	.w/rosign as a
LLC Manager	2015 SEC ALL
(Print Title)	AHA DEC
of this limited liability company and affirm the limited liability conresignation in writing.	mpany has been potified of my

Filing Fee:

Certified Copy:

\$25.00 (Required)

\$30.00 (Optional)