# L10000103949

(Requestor's Name)				
(Address)				
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(Cib./Chata/Zia/Dhona 40				
(City/State/Zip/Phone #)				
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2012 MAR 30 PM 1: 15
SECRETARY OF STATE

J. BRYAN

APR - 2 2012

**EXAMINER** 

#### **COVER LETTER**

Division of Corporations
SUBJECT: HOME HUNTERS Rentals and SAles (Name of Limited Liability Company)
The enclosed member, managing member or manager resignation and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
Leonid WeinStein (Contact Person)
(Firm/Company)
(Contact Person)  ASECRETAR 30  (Firm/Company)  /0945 Ba/ Halbar Orive (Address)
BOCA Raton, FL 33498 (City/State and Zip Code)
For further information concerning this matter, please call:
Leowid Weinstein at (561) 212-4757 (Name of Contact Person) (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for:

#### STREET/COURIER ADDRESS:

\$25 Filing Fee

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

\$55 Filing Fee &

Certified Copy

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

CR2E079 (5/06)

TO:

Registration Section



### FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

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

		ns it appears on the records of RenHA/S and SA	
2. This limited liab	ility company was organize	ed under the laws of:	
3. The Florida docu	ment/registration number of 20103949	of this limited liability compa	ny is: MAR
4. I, Leonid (Print N	WeinStein ame of Person Resigning)	, hereby resign as a <u>//</u>	LANGING MEMBER
of this limited lial resignation in wri		he limited liability company l	has been notified of my
Signature of Resi	gning Member, Managing	Member or Manager	Z012 HAR SECRETALIAHA
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)		R 30 PH 1: 1 TARY OF STATASSEE, FLORE