110000000041

(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



000211772820

09/19/11--01034--007 **25.00

SECRETARY OF STATE TALLAHASSEE. FLORIDA

TICE IN ANIII

T. HAMPTON

`-- ø u 2011

EXAMINER

COVER LETTER

TO: Registration Section Division of Corporations	
Division of Corporations	
SUBJECT: My Home Capital, LLC	
(Name of Limite	ed Liability Company)
The enclosed member, managing member or n filing.	nanager resignation and fee(s) are submitted for
Please return all correspondence concerning th	nis matter to:
Itay S Guy	·
(Contact Person)	
(Firm/Company)	·
3107 Edgewater Dr Suite 1	
(Address)	
Orlando, FL 32804	
(City/State and Zip Code)	
For further information concerning this matter	, please call:
	at (407) 835-0965
(Name of Contact Person)	(Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to	the Florida Department of State for:
\$25 Filing Fee	\$55 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

	limited liability company as Home Capital, LLC	it appears on the records	of the Florida De	partment
2. This limited liab	ility company was organized	under the laws of:		
3. The Florida docs	ument/registration number of	this limited liability com	pany is:	
4. I, Sagi Grins	htein	, hereby resign as a	MGRM	
	Jame of Person Resigning)		(Print Title)	
of this limited lia resignation in wr	bility company and affirm the iting.	e limited liability compan	y has been notifie	d of my
	Sqq:			
Signature of Res	gning Member, Managing M	lember or Manager		
Filing Fee:	\$25.00 (Required)			
Certified Copy:	\$30.00 (Optional)			~

CR2E079 (5/06)

2011 SEP 19 AM 11: 31
SECRETARY OF STATE