## L12000041535

(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ry/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	rsiness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
		-

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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: UNS HOME Improvements, 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:
Scarlett Acosta (Contact Person)  INS Home Tunomuments I.C.
(Firm/Company)  318 Leah Miller DR NW  (Address)
Ft. Walton Beach, FL 32548 (City/State and Zip Code)
For further information concerning this matter, please call:
(Name of Contact Person) at (\$50) \$03-2544 (Area Code & Daytime Telephone Number)
Enclosed please find a check made payable to the Florida Department of State for:  \$\sum_{\sum_{0}}\$\$ \$25 Filing Fee & Certified Copy
STREET/COURIER ADDRESS: MAILING ADDRESS:

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

CR2E079 (2/14)

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)

1. The name of the lin	nited liability company as it appears on the records of the Florida Department
of State is:	INS Home Improvements, LLC
2. The Florida docume	ent/registration number assigned to this limited liability company is:
_L120000-	11535
3. The date this memb	per/manager withdrew/resigned or will withdraw/resign is: 7 18 2014
4.1, <u>Jose 1</u>	
managina	member
of this limited liabili resignation in writin	ty company and affirm the limited liability company has been notified of my g.
Must 3	aux Mud
Signature of Disso	ociating Member or Resigning Manager
Filing Fee:	\$25.00 (Required) \$30.00 (Ontional)