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SWARREN

COVER LETTER

TO: Registration Section		
Division of Corporations		
SUBJECT: HAVEN HOMES LLC	5. 411 PTv. 0	
(Name of Lim	ited Liability C	ompany)
The enclosed member, resignation or dissociate	ation and fee	(s) are submitted for filing.
Please return all correspondence concerning	this matter to):
KEITH GAINES	•	
(Contact Person)		
NA		
(Firm/Company)		_
701 S HOWARD AVE, STE. 106		
(Address)		
TAMPA FL 33606		
(City/State and Zip Code)		_
For further information concerning this matter	er, please cal	1:
KEITH GAINES	813	766-6817 de & Daytime Telephone Number)
(Name of Contact Person)	(Area Co	de & Daytime Telephone Number)
Enclosed please find a check made payable to \$25 Filing Fee		Department of State for: ng Fee & Certified Copy
STREET/COURIER ADDRESS:		MAILING ADDRESS:
Registration Section Division of Corporations		Registration Section Division of Corporations
Clifton Building		P.O. Box 6327
2661 Executive Center Circle		Tallahassee, Florida 32314
Tallahassee, Florida 32301		

CR2E079 (2/14)



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)

	limited liability company as	it appears on the records of the Florida Department
2. The Florida doc	•	ssigned to this limited liability company is:
		igned or will withdraw/resign is:
4. I, KEITH GAIN	ES	, hereby withdraw/resign as a
MANAGER (I		
•	(Print Title)	
resignation in wr	• •	e limited liability company has been notified of my ning Manager
	\$25.00 (Required) \$30.00 (Optional)	THE MAY 10