L15000 181195

(Requestor's Name)				
(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:				





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SECRETARY OF STATE
SECRETARY OF STATE
ANIASSEE, FLORIDA

d2/1605

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJECT: SFL FAST HOME BUYERS, LLC		
(Name of Limited Liability Co	ompany)	
The enclosed member, resignation or dissociation and feet	(s) are submitted for filing.	
Please return all correspondence concerning this matter to	:	
HARRISON ALLWEISS		
(Contact Person)	_	
SFL FAST HOME BUYERS, LLC		
(Firm/Company)		جيد بريا
20533 BISCAYNE BLVD, 455		6 AU ECRE
(Address)	_	TAR
AVENTURA, FL 33180		TOF S
(City/State and Zip Code)	_	LOS N
For further information concerning this matter, please call	:	PH 8
HARRISON ALLWEISS 954	931-5601	
(Name of Contact Person) (Area Coo	le & Daytime Telephone Numb	oer)
Enclosed please find a check made payable to the Florida \$25 Filing Fee \$55 Filing	Department of State for: ng Fee & Certified Copy	
STREET/COURIER ADDRESS:	MAILING ADDRESS:	
Registration Section Division of Corporations	Registration Section Division of Corporations	

P.O. Box 6327

Tallahassee, Florida 32314

CR2E079 (2/14)

Clifton Building

2661 Executive Center Circle Tallahassee, Florida 32301



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	limited liability company as	s it appears on the records o	of the Florida Department
of State is:	L FAST HOME BUYERS,	, LLC	·
2. The Florida doc L1500018119	ument/registration number a 95	ssigned to this limited liabi	lity company is:
3. The date this me	ember/manager withdrew/res	signed or will withdraw/res	4/1/2016 ign is:
4. I, HARRISON ALLWEISS (Print Name of Person Resigning)		, hereby withdraw/res	sign as a
OWNER	(ame of Person Resigning)		
	(Print Title)		
of this limited lia resignation in w	bility company and affirm thiting.	ne limited liability company	has been notified of my
#			F 16 AUG SECRET TALLAHA
Signature of Di	issociating Member or Resig	ning Manager	ARY OF S
Filing Fee:	\$25.00 (Required)		LOR LOR
Certified Copy:	\$30.00 (Optional)		見前 二