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STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

2016 SEP 16 P 2:05

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SEP 19 2016

BRUCE

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Home Source Group 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:

Luis Marino  
(Contact Person)

Home Source group LLC  
(Firm/Company)

2326 Del Prado Blvd  
(Address)

Cape Coral, FL 33909 (33990)  
(City/State and Zip Code)

For further information concerning this matter, please call:

Luis Marino at (239) 440-4410  
(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:**

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

**MAILING ADDRESS:**

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 limited liability company as it appears on the records of the Florida Department of State is: Home Source Group LLC

2. The Florida document/registration number assigned to this limited liability company is: 81-1218317

3. The date this member/manager withdrew/resigned or will withdraw/resign is: 9/12/16

4. I, Natasha M. Hunter P.A., hereby withdraw/resign as a  
*(Print Name of Person Resigning)*

Manager  
*(Print Title)*

of this limited liability company and affirm the limited liability company has been notified of my resignation in writing.

Natasha Hunter  
Signature of Dissociating Member or Resigning Manager

Filing Fee: \$25.00 (Required)  
Certified Copy: \$30.00 (Optional)