

116000129252

(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:

Office Use Only



300321574863

12/12/18 01007 012 \$425.00

FILED
2018 DEC 12 PM 2:07
CLERK OF COURT
PALM BEACH COUNTY, FLORIDA

Number / Res

DEC 21 2018

I ALBRITTON

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: House Group Assets, LLC
(Name of Limited Liability Company)

The enclosed member, resignation or dissociation and fees are submitted for filing.
Please return all correspondence concerning this matter to:

William Solano
(Contact Person)

House Group Assets, LLC
(Name of Company)

1027 S 21 AVE
(Address)

HOLLYWOOD, FL 33020
(City, State and Zip Code)

For further information concerning this matter, please call:

WILLIAM SOLANO 954 266-3267
(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

CR1009 (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)

1. The name of the limited liability company as it appears on the records of the Florida Department of State is: HOUSE GROUP ASSETS, LLC

2. The Florida document registration number assigned to this limited liability company is:
L16C00129252

3. The date this member manager withdrew, resigned or will withdraw resign is: 11/26/2018

4. I, VIVIEN ROBOTIS, 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.

Signature of Dissociating Member or Resigning Manager

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

CR210702110

FILED
2018 DEC 12 PM 2:07
SECRETARY OF STATE
TALLAHASSEE, FLORIDA