## 117000188642

(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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TALL SECRETARY LIVE SECRETARY OF STALL

AMB 3 0 377 T SCHROEDER

## COVER LETTER

CR2E079 (2/14)

TO:	Registration Section Division of Corporations					
SUBJ	Touched By Love Home Care Services LLC					
3000	(Name of Limited Liability Company)					
The er	nclosed member, resignation or dissocia	tion and fee(s)	are submitted for filing.			
Please	return all correspondence concerning the	his matter to:				
Marie B Samson-Joseph						
	(Contact Person)					
Touched BY Love Home Care Services						
	(Firm/Company)		•			
2101	Vista Parkway, Ste. 282					
	(Address)		•			
West Palm Beach, FL. 33411						
	(City/State and Zip Code)					
For further information concerning this matter, please call:						
Dunb	ear Wright	754	234-9400			
	(Name of Contact Person)	(Area Code	& Daytime Telephone Number)			
	sed please find a check made payable to 5 Filing Fee	the Florida D  \$55 Filing	epartment of State for: Fee & Certified Copy			
_	EET/COURIER ADDRESS:		MAILING ADDRESS:			
_	tration Section ion of Corporations		Registration Section Division of Corporations			
	n Building		P.O. Box 6327			
	Executive Center Circle		Tallahassee, Florida 32314			
Tallah	nassee, Florida 32301					



## FLORIDA DEPARTMENT OF STATE DIVISION OF CORPORATIONS

## DISSOCIATION OR RESIGNATION OF MEMBER, MANAGER FROM FLORIDA OR FOREIGN LIMIT CO LIABILITY COMPANY

(Pursuant to 605.021¢, rborida Statutes)

	limited liability company ched By Love Home Car		ds of the Florida Department
2. The Florida docu L1700018864	ument/registration number 2	assigned to this limited li	iability company is:
3. The date this me	mber/manager withdrew/re	 esigned or will withdraw/	/resign is:
D: 010			
(Print N	lame of Person Resigning)		•
Authorized M	ember		
	(Print Title)		
resignation in wr	iting. H Mu		oany has been notified of my
Signature of Di	ssociating Member or Res	ignio <sub>d</sub> - Pruger	FILED AUG 21 AMII AUG 25 AMII AUG 25 AMIII
Filing Fee:	\$25.00 (Required)		
Certified Copy:	\$30.00 (Optional)		MIII: I