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J. LEGGETT MAR 3 0 2018

COVER LETTER

TO: Registration Section

CR2E079 (2/14)

Division of Corporations		
SUBJECT: JH TOP TAX REFUND L	.LC	
	Limited Liability Con	npany)
The enclosed member, resignation or dis-	sociation and fee(s) are submitted for filing.
Please return all correspondence concern	ing this matter to:	
Julio A Hernandez		
(Contact Person)	_	-
JH TOP TAX REFUND LLC		
(Firm/Company)		-
7080 NW 177ST APT 204		
(Address)		-
HIALEAH FL 33015		
(City/State and Zip Code)		-
For further information concerning this n	natter, please call:	
Julio A Hernandez	786	3460205
(Name of Contact Person)		& Daytime Telephone Number)
Enclosed please find a check made payab ■ \$25 Filing Fee		repartment of State for: Fee & Certified Copy
STREET/COURIER ADDRESS: Registration Section		MAILING ADDRESS: Registration Section
Division of Corporations		Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301		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	s it appears on the records of the	Florida Depa	artment
of State is:	H TOP TAX RE	FUND LLC		
2. The Florida doct		ssigned to this limited liability ed	ompany is:	
3. The date this member/manager withdrew/resigned or will withdraw/resign is			03/26/2018	
Julio A Horne	andor	, hereby withdraw/resign as		
(Print N Manager	'ame of Person Resigning)			
	(Print Title)			1 8
of this limited lia resignation in wr	bility company and affirm th	ne limited liability company has b	een notified	l obmy
	Auf		÷.	PH 2: 25
Signature of Di	ssociating Member or Resig	ning Manager		25
Filing Fee: Certified Copy:	\$25.00 (Required) \$30.00 (Optional)			