L19 0000 31356

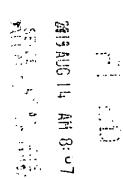
(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
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(Business Entity Name)				
(Document Number)				
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COVER LETTER

TO:	Registration Section		
I	Division of Corporations		
SUBJE	CT: HOME 360 DEVELOPER	SLLC	
	(Name of L	Limited Liability Co	impany)
The enc	losed member, resignation or disso	ociation and fee(s) are submitted for filing.
Please re	eturn all correspondence concernir	ng this matter to:	
JOHN	LAGO		
	(Contact Person)		_
LAGO I	FINANCIAL LLC		
	(Firm/Company)	· · · · · · · · · · · · · · · · · · ·	_
12503	SW 79TH STREET		
	(Address)		_
MIAMI,	FL 33183		
	(City/State and Zip Code)		_
For furth	ner information concerning this ma	atter, please call:	
JOHN L	_AGO	305 at (253-8225
	(Name of Contact Person)	(Area Code	e & Daytime Telephone Number)
Enclosed ■ \$25 F	d please find a check made payable filing Fee	e to the Florida I \$55 Filin	Department of State for: g Fee & Certified Copy
	T/COURIER ADDRESS:		MAILING ADDRESS:
_	tion Section of Corporations		Registration Section
Clifton I			Division of Corporations P.O. Box 6327
2661 Ex-	ecutive Center Circle		Tallahassee, Florida 32314

CR2E079 (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)

	e limited liability company as it ME 360 DEVELOPERS LLC	appears on the records of the Fl	lorida Dep	oartment
		gned to this limited liability con	npany is:	
L1900003135	66		347 1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	: •0
		ned or will withdraw/resign is:)8/12/20	19
4. I,		, hereby withdraw/resign as a	1 . 4	
(Print l	Name of Person Resigning)	, hereby withdraw/resign as a	•	CD
MANAGER			344 ·	M 8: 07
	(Print Title)		÷.	
resignation in wr	ibility company and affirm the litting. HURA Isociating Member or Resigning	imited liability company has been been been been been been been bee	en notified	d of my
	\$25.00 (Required)			
Certified Copy:	\$30.00 (Optional)			