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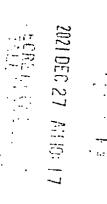
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Special Instructions to	Filing Officer:	

Office Use Only



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## **COVER LETTER**

TO:	Registration Section			•
	Division of Corporations			
SUBJ				
		(Name of Limited	Liability Con	npany)
The e	nclosed member, resignation	on or dissociation	on and fee(s	s) are submitted for filing.
Please	e return all correspondence	concerning this	s matter to:	
Mellisa	a Sue Hoomes			
	(Contact Pers	on)		-
Charles	s Hoomes Painting, LLC			
	(Firm/Compa	ny)		_
4000 B	Barfield Ave.			
	(Address)		•	_
Pensac	cola,Fl. 32505			
	(City/State and Z	ip Code)		_
For fu	orther information concerni	ng this matter,	please call:	
Mellisa	a Sue Hoomes	at	850 : (	377-3774
	(Name of Contact Person			& Daytime Telephone Number)
Enclo	sed please find a check ma	de payable to th	he Florida E	Department of State for:
<b>=</b> \$23	5 Filing Fee		□ \$55 Filing	Fee & Certified Copy
	Mailing Address:			Street Address:
	Registration Section			Registration Section
	Division of Corporations			Division of Corporations
	P.O. Box 6327			The Centre of Tallahassee
	Tallahassee, FL 32314			2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



## 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)

	the limited liability corr				rida Dep	partment
2. The Florida d	ocument/registration nu	ımber assigned	l to this limited	d liability comp	oany is:	
3. The date this	member/manager witho	drew/resigned of	or will withdra	w/resign is:	/1 <i>5/</i> 2021	
4. I, Charles Danie	el Hoomes	g) ,	hereby withdra	aw/resign as a		
Registered Ag		•				
<del></del>	(Print Title)	·				
of this limited resignation in	liability company and a writing.	offirm the limit	ed liability co	mpany has beer	n notifie	d of my
Ü	Dissociating Member of		lanager			2021 DEC
Filing Fee:	\$25.00 (Required	1)			•	0.0

\$25.00 (Required)

\$30.00 (Optional)

CR2E079 (2/14)

Certified Copy: