L330003110913

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
(0.1), 0.000,		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		
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COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: The Homebuilders Coach	
Name of Limited Liability	Company
DOCUMENT NUMBER: L23000216913	
The enclosed Resignation of Registered Agent for a Limited for filing.	d Liability Company and fee are submitted
Please return all correspondence concerning this matter to the	he following:
United States Corporation Agents, Inc.	
Name of Person	-
Legalzoom.com, Inc.	
Name of Firm/Company	•
9900 Spectrum Dr.	
Address	•
Austin, TX 78717	
City/State and Zip Code	
raresignations@legalzoom.com	
E-mail address: (to be used for future annual report notification)	•
For further information concerning this matter, please call:	
at (<u>800</u>	773-0888
Name of Person Area Code	Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for \$85.00 for an active limited liability company or \$25.00 for an administratively dissolved, voluntarily dissolved or withdrawn limited liability company.

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

STATEMENT OF RESIGNATION OF REGISTERED AGENT FOR A LIMITED LIABILITY COMPANY

Pursuant to the provisi	ons of section 605.0115, Florida Statutes, the	undersigned,
United States Corporation Agents, Inc.		harshu rasiuma as
	Name of Registered Agent	, hereby resigns as
Registered Agent for _	The Homebuilders Coach, L.L.C.	
	Name of Limited Liability Company	,
L23000216913		
Document N	lumber, if known	
	ion was mailed to the above listed limited liab	
The agency is terminat	ed and the office discontinued on the 31st day	after the date on which this statement is filed.
	Signature of Resigning Ag	gent
If signing on behalf of	an entity:	
	Cheyenne Moseley	
	Typed or Printed Name	
	Asst. Secretary for United States Corporatio	n Agents. Inc.
	Capacity	

FILING FEES:
\$ 85.00 Active limited liability company
\$ 25.00 Administratively dissolved/ voluntarily dissolved/ withdrawn limited liability company

Make checks payable to Florida Department of State and mail to:
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314