M13000001243

(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:

J. HORNE
MAR 22 2025
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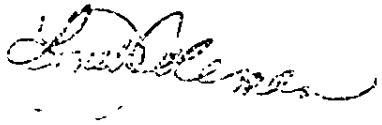
CSC - Tallahassee
1201 Hays Street
Tallahassee, FL 32301-2607
850-558-1500, Ext: x62969

To: Department Of State, Division Of Corporations
From: Amanda Miller
Ext: x62969
Date: 03/21/25
Order #: 1890911-1
Re: Home Partners Realty Florida, LLC
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:
Application for Certificate of Withdrawal
Amount to be deducted from our State Account: $25.00 - FL State Account Number: I20000000195

Please take the following action:
File in your office on basis
Issue Proof of Filing



Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

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NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

HOME PARTNERS REALTY FLORIDA LLC

(Name of limited liability company)

Delaware

(Jurisdiction of its organization)

December 8, 2014

(Date registered with Florida Department of State)

M13000007243

(Florida Document Number)

This limited liability company is withdrawing its certificate of authority in this state.

Effective Date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(Signature of authorized representative)

Jonathan Babb

(Typed or printed name of signee)

Filing Fee: $25.00

CSC WD-204523