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COVER LETTER

	tration S ion of Co	ection orporations		
SUBJECT:	almerHo	ouse Properties & Associ	ation	
SUBJECT: _	 -	(Name of Fo	reign Limited Liability	Company)
Dear Sir or Ma	adam:			
The enclosed v	withdraw	al and fee(s) are submitte	ed for filing.	
Please return a	il corresp	ondence concerning this	s matter to the followin	g:
Ashley Bower	's			
		(Name of Person)	 -	_
HomeSmart H	oldings			
		(Firm/Company)		_
8388 E Hartfo	rd Dr. Su	ite 100		
	.	(Address)	_	_
Scottsdale, AZ	85255			
		(City/State and Zip Coo	le)	_
For further info	ormation	concerning this matter, p	please call:	
Ashley Bower	s		602 at (889-2123
	(Name	e of Person)		& Daytime Telephone Number)
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314				Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303
Enclosed is a o	check foi	the following amount:		
□\$25 Filing F	ee [□ \$30 Filing Fee & Certificate of Status	□\$55 Filing Fee & Certified Copy	☐ \$60 Filing Fee, Certificate of Status & Certified Copy

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

PalmerHouse Properties & Associates LLC			
(Name of limited liability company)		_	
Florida			
(Jurisdiction of its organization)			
2/20/2019			
(Date registered with Florida Department of State)			
M19000002191			
(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:	(onti	ional)	
Note: If the date inserted in this block does not meet the applicable statutory fil this date will not be listed as the document's effective date on the Department of Signature of authorized representative)			
(Signature of authorized representative)			
Ashley Bowers (Typed or printed name of signee)		2022 0.10	٠,
	FARY OF STATE NORSEE, FL	0220°C 12 PH 2: 39	

Filing Fee: \$25.00