

L11000140600

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

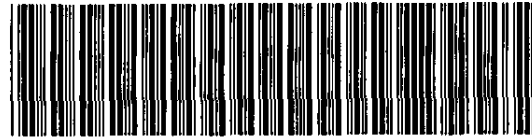
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

JUN 24 2014

S. YOUNG

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Hanover Hammock Trails II, LLC

(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Peggy Jensen

(Name of Person)

Royal Oak Homes

(Firm/Company)

2420 S. Lakemont Avenue, Suite 450

(Address)

Orlando, FL 32814

(City/State and Zip Code)

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TALLAHASSEE, FL 32301

For further information concerning this matter, please call:

Stephen Orosz

(Name of Person)

407

at (

206-9302

) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee and Certificate of Dissolution

HLC

☐ \$55.00 Filing Fee, Certificate of Dissolution &
Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

**ARTICLES OF DISSOLUTION
FOR
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is
Hanover Hammock Trails II, LLC
2. The Articles of Organization were filed on 12/14/2011 and assigned
document number L11000140600
3. The delayed effective date the dissolution if not effective on the date of filing: 05/01/2014
(effective date cannot be prior to or more than 90 days later than date document is received for filing)
4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section
605.0707, Florida Statutes, (copy 605.0707 on back cover letter).
Company no longer has assets, debts, bank accounts and no longer does any
business in the State of Florida.
5. If there are no members, enter the name and address of the person appointed to wind up the company's
activities and affairs:

6. Signature of an authorized person or if there are no members, the signature of the person appointed and
listed above to wind up the company's activities and affairs:

Signature

Stephen Orosz

Printed Name

FILING FEE: \$25.00

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