120000 254511

(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: Spoke to han hee Joh
to make corrections.
5/3/22 Q. SILAS
MAY 03 2022



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2022 MAY -3 AM 9: 55 SECRETARY OF STATE

Office Use Only



May 2, 2022

HUONG NGOC HOA 867 ISLANDER AVENUE ORLANDO, FL 32825

SUBJECT: HUONG NGOC HOA, LLC.

Ref. Number: L20000254511

We have received your document and check(s) totaling \$100.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The revocation of dissolution date must be after 03/23/2022. You cannot use 08/18/2020.

The articles of revocation of dissolution must be accompanied by a copy of the previously filed articles of dissolution.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 722A00010153

Querida R Silas Regulatory Specialist II

www.sunbiz.org

COVER LETTER

	istration Section ision of Corporations	
SUBJECT: _	HUONG NGOC - Name of Limited Liability	
The enclosed submitted for	d Statement of Revocation of Dissolution for Florida r filing.	Limited Liability Company and fee(s) are
Please return	all correspondence concerning this matter to:	
	HUONG NGOC HOA Contact Person	
+	HUONG NGOC HOA LLC Firm/Company	
867	Islander Avenue, Orange	County
<u>Orla</u>	ando Florida, 32825 City, State and Zip Code	
E-mail a	Spah ung hoa a gmail co address: (to be used for future annual report notificati	mon)
For further in	nformation concerning this matter, please call:	
HUON Nar	MG NGOC HOA at (+ Area	Code Daytime Telephone Number
<u>M</u> :	ailing Address:	Street Address:

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

Registration Section
Division of Corporations
The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

FILED

STATEMENT OF REVOCATION OF DISSOLUT MAY -3 AM 9: 55 FOR FLORIDA LIMITED LIABILITY COMPANY SECRETARY OF STATE TALL AHASSEE, FL

Pursuant to section 605.0708, Florida Statutes, this Florida limited liability company revokes its articles of dissolution prior to the expiration of 120 days following the effective date (or file date, if no effective date) of the articles of dissolution.

1.	The name of the company is: HUONG NGOC HOA, LLC.		
2.	The document number of the company is 12000025 4511		
3.	The effective date the Dissolution was filed is $3 - 23 - 2022$ $3 - 24 - 2022$		
[4.	The revocation of dissolution was authorized on 48 2020		
(<u>5.</u>	A copy of the Articles of Dissolution is attached.		
Signature of person authorized to submit the revocation of dissolution			

Filing Fee: \$100.00

Certified Copy: \$30.00 (optional)

CR2E132 (10/15)

FILED Mar 23, 2022 Secretary of State

ARTICLES OF DISSOLUTION

Pursuant to section 605.0707, Florida Statutes, this Florida limited liability company submits the following Articles of Dissolution:

The name of the limited liability company as currently filed with the Florida Department of State: HUONG NGOC HOA, LLC.

The document number of the limited liability company: L20000254511

The file date of the articles of organization: August 18, 2020

The effective date of the dissolution if not effective on the date of filing: March 23, 2022

A description of occurance that resulted in the limited liability company's dissolution:

I WANT TO CLOSE MY HUONG NGOC HOA LLC

The name and address of the person appointed to wind up the company's activities and affairs:

HUONG NGOC HOA 867 ISLANDER AVE ORLANDO, FL 32825 US

. . . .

I/we submit this document and affirm that the facts stated herein are true. I/we am/are aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in section 817.155, Florida Statutes.

Signature: HUONG NGOC HOA

Electronic Signature of authorized person