

L2100041480E

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

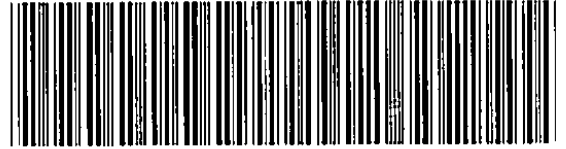
(Document Number)

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2023 JAN 20 AM 9:31
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
2023 JAN 20 PM 1:51
SECRETARY OF STATE
TALLAHASSEE, FL

1/27/2023

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

DATE 01/20/2023

****WALK IN**

ENTITY NAME K. Hovnanian's Four Seasons at Lake Harris, LLC

DOCUMENT NUMBER _____

****PLEASE FILE THE ATTACHED AND RETURN****

XXXXXX

Plain Copy

Certified Copy

Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

Certified Copy of Arts & Amendments

Certified Copy of Arts & Amendments Complete File (Including Annual Reports)

Certificate of Status

Certificate of Status Reflecting: _____

****APOSTILLE' / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____

NUMBER OF CERTIFICATES REQUESTED _____

TOTAL OWED \$ 25

ACCOUNT # 120140000108
United Corporate
Services, Inc.

Keith Heyward

Please call Tina at the above number for any issues or concerns. Thank you so much!

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: K. Hovnanian's Four Seasons at Lake Harris, 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:

Grace Caterino

(Name of Person)

K. Hovnanian Companies, LLC

(Firm/Company)

90 Matawan Road - Floor 5

(Address)

Matawan, NJ 07747

(City/State and Zip Code)

For further information concerning this matter, please call:

Grace Caterino

at (732) 383-2628

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee and Certificate of Dissolution

☐ \$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 Address:

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

CORRECTED
Please Allow 1
Same File Da

January 25, 2023

SUNSHINE STATE CORPORATE COMPLIANCE COMPANY

SUBJECT: K. HOVNANIAN'S FOUR SEASONS AT LAKE HARRIS, LLC
Ref. Number: L21000414803

We have received your document for K. HOVNANIAN'S FOUR SEASONS AT LAKE HARRIS, LLC and the authorization to debit your account in the amount of \$25.00. However, the document has not been filed and is being returned for the following:

You failed to make the correction(s) requested in our previous letter.

The document must include a description of the information that must be included in a written claim. The description may include but not limited to who is filing the claim, the amount of the claim and a reason the claim is being filed.

The document must include a mailing address to which the claim may be sent.

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.

Claretha Golden
Regulatory Specialist II

Letter Number: 223A00001831

RECEIVED
2023 JAN 26 AM 9:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

CORRECTED
Please Allow For
Same File Date

January 23, 2023

SUNSHINE STATE CORPORATE COMPLIANCE COMPANY

SUBJECT: K. HOVNANIAN'S FOUR SEASONS AT LAKE HARRIS, LLC
Ref. Number: L21000414803

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

PLEASE WRITE YOUR DESCRIPTION ON SECTION FOUR.

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.

Jasmine N Horne
Regulatory Specialist II

Letter Number: 023A00001578

2023 JAN 24 PM 12:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

FILE

2023 JAN 20 PM
SECRETARY OF STATE
TALLAHASSEE, FL

1. The name of a limited liability company is
K. Hovnanian's Four Seasons at Lake Harris, LLC
2. The Articles of Organization were filed on ~~1/19/23~~ 09/21/2021 and assigned
document number L21000414803
3. The delayed effective date the dissolution if not effective on the date of filing: _____
(effective date cannot be prior to or more than 90 days later than date document is received for 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.
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).
Sole member vote to dissolve, not needed
Sole member vote to dissolve, not needed
Sole member vote to dissolve, not needed
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:

Elizabeth D. Tice

Signature

Elizabeth D. Tice

Printed Name

FILING FEE: \$25.00