Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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Ta:

Division of Corporations

Fax Number : (850)617-6383

From:

: TRIAD PROFESSIONAL SERVICES Account Name

Account Number : I2016000000B Phone : (850)777-2091

Fax Number

: (770)220-1943

LLC DISSOLUTION OR WITHDRAWAL JEN FLORIDA II, LLC

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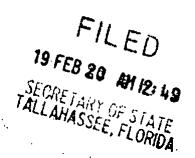
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Corporate Filing Menu

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COVER LETTER

TO: Registratio			.*
Division of	f Corporations		
	lorida II, LLC		
SUBJECT:	(Name of For	eign Limited Liability (Сопірацу)
Dear Sir or Madam:			
The enclosed withd	rawal and fee(s) are submitte	d for fil ing .	•
Please return all coe	respondence concerning this	matter to the following	:
Caroline ("Carlie")	Estrada		
	(Name of Person)		•
Taylor Morrison			•
	(Firm/Company)		•
4900 N. Scottsdale	Road		
	(Address)		•
Scottsdale, AZ 852	51		
	(City/State and Zip Cod	(e)	•
For further informs	tion concerning this matter, p	lease call:	
Caroline ("Carlie")	Estrada	480 nt (840-8104
6	Name of Person)	(Area Code &	Daytime Telephone Number)
STREET/	COURIER ADDRESS:	MAIL	ING ADDRESS:
	· · · · · · · · · · · · · · · · · · ·		ration Section
	f Corporations	Division of Corporations	
Clifton Bu	utive Center Circle	P.O. Box 6327 Tallahassee, Florida 32314	
	e, Florida 32301	[4/12/	addicty i formation 247
Enclosed is a checl	c for the following amount:	ž.	
S25 Filing Fee	□ \$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

EN Florida H, LLC
(Name of limited liability company)
Dolawere
(Jurisdiction of its organization)
November 24, 2010
(Date registered with Florida Department of State)
M10000001291
(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:
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) Authorized Signatory / Director of Compliance
Caroline ("Carlie") Estrada
(Typed or printed name of signec)

Filing Fee: \$25.00