M20000011009

900388840959

STATEMENT OF FACT

OF

FOREIGN LIMITED LIABILITY COMPANY

1. The undersigned, being a duly authorized officer and representative of Hut Florida LLC, a Delaware limited liability company (the "Company"), hereby makes the following statements of fact and certifies as follows:

   a. The name of the limited liability company is Hut Florida LLC.

   b. The Company was authorized to transact business in the State of Florida on December 2, 2020, and the Florida Department number of the Company is M20000011009.

   c. The Company is disputing the "Notice of Withdrawal of Certificate of Authority" filed with the Florida Division of Corporations on November 14, 2022 (the "Fraudulent Document").

   d. The Fraudulent Document is false, erroneous and defectively signed.

   e. The Fraudulent Document was signed by J. Ross Davis, Jr., and submitted by Ken of CogencyGlobal on behalf of Bethany Noblin of Homes Urban, LLC (collectively, the "Unknown Parties").

   f. The Company has no relation to, or familiarity with, the Unknown Parties.

   g. The Unknown Parties are not persons authorized to act on behalf of the Company, as required under Section 605.0203(1)(1) of the Florida Revised Limited Liability Company Act.

   h. The Fraudulent Document was not signed by an authorized representative of the Company, as required under Section 605.0910 of the Florida Revised Limited Liability Company Act, and therefore does not meet the stipulated statutory filing requirements.

   i. The Company and/or any of its authorized representatives did not prepare and/or submit the Fraudulent Document for filing.

   j. The result of the Fraudulent Document causes great harm, loss and damages to the Company as the Company is actively doing business in Florida and holds numerous state and local business licenses tied to Florida Department number M20000011009.

k. The persons authorized by the Company, as reflected on the records on file with the Division of Corporations, and evidenced by the initial Application by Foreign Limited Liability Company, as amended, and each Annual Report, are:

Gregory G. Flynn, Chief Executive Officer

Lorin M. Cortina, Executive Vice President and Chief Financial Officer; and

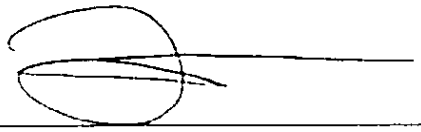
Ron Igarashi, the Secretary

2. Pursuant to the foregoing statements of fact, the Company requests that the Division of Corporations invalidate, nullify and void the Fraudulent Document and place the Company back into good standing and "Active" status.

(Signature Page Follows)

IN WITNESS WHEREOF, the undersigned as has executed this Statement of Fact as of November __, 2022.

HUT FLORIDA LLC



Lorin M. Cortina, Executive Vice President and
Chief Financial Officer

State of California
County of Sacramento

On November ___, 2022, before me, _____, Notary Public, personally appeared Lorin M. Cortina, who proved to me on the basis of satisfactory evidence to be the person whose name is subscribed to the within instrument and acknowledged to me that he executed the same in his authorized capacities, and that by his signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

SIGNATURE_____

CALIFORNIA ALL-PURPOSE ACKNOWLEDGMENT CIVIL CODE § 1189

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California)
County of San Francisco)

On Nov 21, 2022 before me, Marlene Gonzaga Adamson, a notary public
Date *Here Insert Name and Title of the Officer*

personally appeared Lorin M. Crytzer
Name(s) of Signer(s)

who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.

MARLENE GONZAGA ADAMSON
Notary Public - California
San Francisco County
Commission # 2394459
My Comm. Expires Mar 18, 2026

Signature _____
Signature of Notary Public

Place Notary Seal Above

OPTIONAL

Though this section is optional, completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document
Title or Type of Document: Deed of Trust
Document Date: _____ Number of Pages: _____
Signer(s) Other Than Named Above: _____

Capacity(ies) Claimed by Signer(s)

Signer's Name: _____	Signer's Name: _____
☐ Corporate Officer — Title(s): _____	☐ Corporate Officer — Title(s): _____
☐ Partner — ☐ Limited ☐ General	☐ Partner — ☐ Limited ☐ General
☐ Individual ☐ Attorney in Fact	☐ Individual ☐ Attorney in Fact
☐ Trustee ☐ Guardian or Conservator	☐ Trustee ☐ Guardian or Conservator
☐ Other: _____	☐ Other: _____
Signer Is Representing: _____	Signer Is Representing: _____

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FRAUDULENT DOCUMENT

M20000011009

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

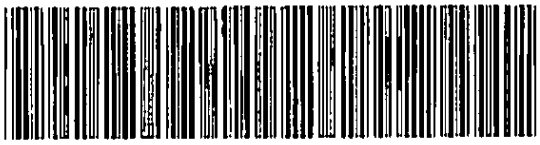
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800393427308

RECEIVED
2022 NOV 14 PM 4:08
TALLAHASSEE, FLORIDA

FILED
2022 NOV 14 AM 11:23
TALLAHASSEE, FL

FRAUDULENT DOCUMENT

COGENCYGLOBAL

115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
866.625.0838
COGENCYGLOBAL.COM

Account#: I20000000088

Date: **November 14, 2022**

Name: **KEN**

Reference #: **1833916**

Entity Name: **HUT FLORIDA LLC**

- ☐ Articles of Incorporation/Authorization to Transact Business
- ☐ Amendment
- ☐ Change of Agent
- ☐ Reinstatement
- ☐ Conversion
- ☐ Merger
- ☑ Dissolution/Withdrawal
- ☐ Fictitious Name
- ☐ Other _____

ISSUES? CALL KEN: 518-213-0738

Authorized Amount: **$25.00**

Signature:

FRAUDULENT DOCUMENT

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HUT Florida LLC
(Name of Foreign Limited Liability Company)

Dear Sir or Madam:

The enclosed withdrawal and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Bethany Noblin
(Name of Person)

Homes Urban, LLC
(Firm/Company)

245 E. Broad St. Ste C
(Address)

Greenville, SC 29601
(City/State and Zip Code)

For further information concerning this matter, please call:

Bethany Noblin at (864) 232-7474
(Name of Person) (Area Code & 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 check for the following amount:

☑ $25 Filing Fee ☐ $30 Filing Fee & Certificate of Status ☐ $55 Filing Fee & Certified Copy ☐ $60 Filing Fee, Certificate of Status & Certified Copy

FRAUDULENT DOCUMENT

FILED
2022 NOV 14 AM 11:23
SECRETARY OF STATE
TALLAHASSEE, FL

NOTICE OF WITHDRAWAL OF CERTIFICATE OF AUTHORITY

HUT Florida LLC
(Name of limited liability company)

Delaware
(Jurisdiction of its organization)

December 2, 2020
(Date registered with Florida Department of State)

M20000011009
(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: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or 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.

/s/ [signature]
(Signature of authorized representative)

J. Bliss Davis, Jr.
(Typed or printed name of signee)

Filing Fee: $25.00