

A02000000785

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

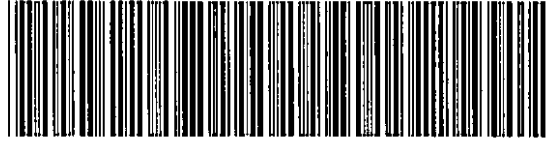
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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THE CLERK OF STATE
TALLAHASSEE FLORIDA

D. BRUCE
FEB 07 2019

COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: HOME STONE LIMITED PARTNERSHIP

(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

The enclosed Certificate of Dissolution and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: Benjamin E. Akselrad, Esq.

(Contact Person)

Bressler, Amery & Ross, P.C.

(Firm/Company)

325 Columbia Turnpike, Suite 301

(Address)

Florham Park, NJ 07932

(City, State and Zip Code)

For further information concerning this matter, please call:

Benjamin E. Akselrad, Esq.

at (

973

) 660-4427

(Name of Contact Person)

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount:

\$52.50 Filing Fee

\$61.25 Filing Fee and Certificate of Status

\$105.00 Filing Fee and Certified Copy

\$113.75 Filing Fee, Certified Copy, and Certificate of Status

STREET ADDRESS:

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

MAILING ADDRESS:

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

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TALLAHASSEE, FLORIDA

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**CERTIFICATE OF DISSOLUTION
FOR**

HOME STONE LIMITED PARTNERSHIP

(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

Pursuant to the provisions of section 620.1203, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose certificate was filed with the Florida Department of State on 06/04/2002, assigned Florida document number A02000000785, hereby submits this Certificate of Dissolution.

FIRST: Reason for dissolution: (State why partnership is submitting dissolution)

HOME STONE LIMITED PARTNERSHIP is dissolving based on the consent of all general partners and all limited partners as well as pursuant to Florida Statute 620.1801(1)(b).

SECOND: A Notice of Dissolution is attached.
(Check box if attached.)

THIRD: Effective date, if other than the date of filing: 1/1/19
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

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.

Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.:

Christine Lambrechts

signing on behalf of the general partner:
Home Vision Management LLC

C. Lambrechts

RECEIVED
FALLS CHURCH
FLORIDA
STATE DEPARTMENT OF STATE

2019 JAN 30 PM 3:15

FILED

Filing Fee: \$52.50
Certified Copy (optional): \$52.50
Certificate of Status (optional): \$8.75

**NOTICE OF DISSOLUTION
FOR
FLORIDA LIMITED PARTNERSHIP
OR LIMITED LIABILITY LIMITED PARTNERSHIP**

This notice is submitted by the dissolved limited partnership or limited liability limited partnership named below or the successor entity for resolution of payment of unknown claims against this limited partnership or limited liability limited partnership as provided in s. 620.1807, F.S.

This "*Notice of Dissolution*" is optional and is not required when filing a Certificate of Dissolution.

Name of Dissolved Limited Partnership or Limited Liability Limited Partnership:
HOME STONE LIMITED PARTNERSHIP

Description of information that must be included in a claim:

All Claims must be presented in writing & must contain sufficient information reasonably to inform the identity of the claimant and the substance of the Claim. This notice does not revive any Claim barred or subject to a statute of limitations as of the date hereof or any date after the date hereof, nor does it constitute acknowledgment that any person who receives this Notice is a proper claimant. HOME STONE LIMITED PARTNERSHIP reserves the right to reject, in whole or in part, any Claim submitted to it in response to this Notice. This Notice does not operate as a waiver of any defense or counterclaim in respect of any Claim asserted by any person.

Mailing address where claims can be sent: (Claims cannot be sent to the Florida Department of State.)

Tanya S. Lambrechts, Esq.

Bressler, Amery & Ross, P.C.

200 East Las Olas Boulevard, Suite 1500, Fort Lauderdale, FL 33301

A claim against the above named limited partnership or limited liability limited partnership will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of the notice.

Signature of a general partner or a principal of the successor entity:

Christine Lambrechts

Printed Name



Signature

Fee: No charge if included with Certificate of Dissolution. If filed separately, \$52.50.

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2019 JAN 30 PM 3:16
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA