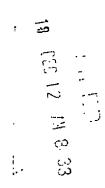
# A05000000558

(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



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# Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.Incserv.com

e-mail: info@incserv.com



### **ORDER FORM**

TO Florida Department of State

Division of Corporations, Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

corphelp@dos.myflorida.com

850-245-6051

FROM

Melissa Stops

mstops@incserv.com

850.656.7953

**REQUEST DATE** 12/12/2018

**PRIORITY** Routine

**OUR REF # (Order ID#)** 706169

**ORDER ENTITY** 

AMELIA RIVER-JACKSONVILLE LIMITED PARTNERSHIP

#### PLEASE PERFORM THE FOLLOWING SERVICES:

AMELIA RIVER-JACKSONVILLE LIMITED PARTNERSHIP (FL)

File the attached dissolution document

#### **NOTES:**

\$52.50 Authorized

#### **RETURN/FORWARDING INSTRUCTIONS:**

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

## CERTIFICATE OF DISSOLUTION **FOR**

Amelia River-Jacksonville Limited Partnership

(Name of Florida Limited Partnership or	r Limited Liability Limited Partnership)		
partnership or limited liability limit. Florida Department of State on 03/2	n 620.1203, Florida Statutes, this Florida ed partnership, whose certificate was filed 21/2005, assigned , hereby submits this Certificate	d with the l Florida	
FIRST: Reason for dissolution: (S	State why partnership is submitting dissolu	ution)	
The events for dissolution that are specified in the partnership agreement have occurred.			
The limited partnership has wound up its a	affairs and no longer does any business in Florida.		
SECOND: A Notice of Dissol (Check box if a		, <b>6.0</b>	
Department of State.)	e than 90 days after the date this document is filed s not meet the applicable statutory filing requirem		
Steven C. Porath, SVP & General Counsel Hearthstone, Inc., Manager of FL HHPH C General Partner	<u></u>	F.S.:	
Filing Fee: Certified Copy (optional):	\$52.50 \$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:

Amelia River-Jacksonville Limited Partnership

Description of information that must be included in a claim:

1. Date of claim. 2. Amount of claim. 3. Name and contact information of party making the claim.

4. Detailed description of claim.

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

c/o Hearthstone, Inc.

24151 Ventura Blvd., Calabasas, CA 91302

Attn: General Counsel

4 years after the filing of the notice.

will be barred unless a proceeding to enforce the claim is commenced within

A claim against the above named limited partnership or limited liability limited partnership

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

Steven C. Porath, SVP & General Counsel of

Hearthstone, Inc., Manager of FL HHPII GP, L.C.,

General Partner

Printed Name

Signature

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