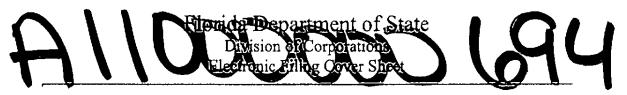
2/20/25, 5:01 PM

Division of Corporations



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Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA0000000023 Phone : (614)280-3338 Fax Number : (614)573-3996

DISS/TERM/CANCEL/REV OF LP/LLP 4TH AVE SOUTH LP

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$52.50

DECEMED

AM 11: 4.3

Electronic Filing Menu

Corporate Filing Menu

Helphili

To:

CERTIFICATE OF DISSOLUTION FOR

4th Ave South LP			
(Name of Florida Limited Partnership o	r Limited Liabil	ity Limited Partnership)	
Pursuant to the provisions of section partnership or limited liability limits. Florida Department of State on 9/21 document number A11000000694,	ted partnership /2011	p, whose certificate was , assi	filed with the gned Florida
FIRST: Reason for dissolution: (State why part	tnership is submitting di	issolution)
The entity is being dissolved due to	the sale of the p	ropfeatywhich the entity was o	riginally formed.
As the entity no longer holds any assets o	r conducts busin	ess activities, it has no furthe	er purpose.
			en 131 141
SECOND: A Notice of Dissolution is attached. (Check box if attached.)		7 ST 00 00 00 00 00 00 00 00 00 00 00 00 00	
THIRD: Effective date, if other than the (Effective date cannot be prior to nor mor Department of State.) Note: If the date inserted in this block does not be listed as the document's effective d	e than 90 days a	oplicable statutory fiting req	
Signatures of each general partner or the p	person appointed 	pursuant to s. 620,1803(3) of Noam Magence, Authoriz NRP 4th Avenue South C	zod Repressentative,
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75		