

A 19000000366

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

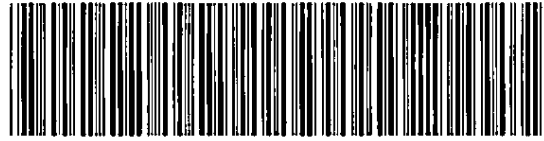
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400390192824

certificate of dissolution

FILED
RECEIVED
2022 NOV 30 PM 12:11
2022 NOV 30 PM 4:41
TALLAHASSEE, FLORIDA

A. RAMSEY

DEC - 1 2022



115 N CALHOUN ST., STE. 4
TALLAHASSEE, FL 32301
P: 866.625.0838
F: 866.625.0839
COGENCYGLOBAL.COM

Account#: I20000000088

Date: 11/30/2022

Name: Chris Vick

Reference #: 1831501

Entity Name: MAINSTREET 1101 SHILOH LTD.

- Articles of Incorporation/Authorization to Transact Business
- Amendment
- Change of Agent
- Reinstatement
- Conversion
- Merger
- Dissolution/Withdrawal
- Fictitious Name
- Other CERTIFIED COPY UPON FILING

Authorized Amount: \$122.50

Signature:

FILED

2022 NOV 30 PM 12 11

**CERTIFICATE OF DISSOLUTION
FOR**

MAINSTREET 1101 SHILOH LTD.

(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 09/11/2019, assigned Florida document number A19000000366, hereby submits this Certificate of Dissolution.

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

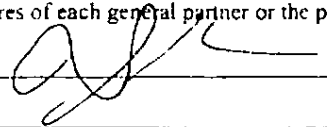
Entity no longer active.

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

THIRD: Effective date, if other than the date of filing: _____
(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.:

 _____

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:
MAINSTREET 1101 SHILOH LTD.

Description of information that must be included in a claim:

Entity no longer active.

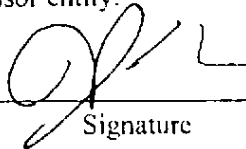
Mailing address where claims can be sent: (Claims cannot be sent to the Florida Department of State)

200 East Broward Blvd., Suite 1100, 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:

Paul Kilgallon
Printed Name


Signature

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