A21000000467

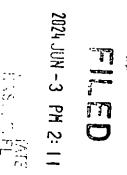
(Requestor's Name)		
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(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
1.7		
Special Instructions to Filing Officer:		

Office Use Only



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12/22/23--01015--017 **\$1.25







January 27, 2024

RYAN MONTEIRO 81056 LEESIDE CT FERNANDINA BEACH, FL 32034

SUBJECT: AMELIA ISLAND BEACH RENTALS, LLLP

Ref. Number: A2100000467

We have received your document for AMELIA ISLAND BEACH RENTALS, LLLP and your check(s) totaling \$61.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

Articles of dissolution must be submitted with the notice of dissolution.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tammi Cline
Regulatory Specialist II Supervisor

Letter Number: 124A00001773

124 JUN - 3 PM 2: 1

www.sunbiz.org

Rec 6/3

COVER LETTER

TO: Registration Section

Division of Corporations
SUBJECT: AMELIA ISLAND BEACH REWTALS, CLLP (Name of Florida Limited Partnership or Limited Liability Limited Partnership)
The enclosed Notice of Dissolution and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to:
RYAN MONTETRO
(Contact Person)
MONTEIRO CONSULTING
(Firm/Company)
81056 LEESIDE CT
(Address)
FERNANDINA BEACH, FL 32034
(City, State and Zip Code)
=====================================
For further information concerning this matter, please call:
For further information concerning this matter, please call: Pyan Monteiro at (561) 797-5613 (Name of Contact Person) (Area Code and Daytime Telephone Number)
(Name of Contact Person) (Area Code and 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 □ \$113.75 Filing Fee, Certified Copy, and Certificate of Status
Mailing Address: Street Address:
Registration Section Registration Section
Division of Corporations Division of Corporations
P.O. Box 6327 The Centre of Tallahassee
Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

CERTIFICATE OF DISSOLUTION FOR

AMELIA ISLAND BEACH RENTALS, LLLP

(Name of Florida Limited Partnership o	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 08/31/2021, assigned Florida document number A21000000467, hereby submits this Certificate of Dissolution.		
FIRST: Reason for dissolution: (State why partnership is submitting dissolution)
NO BUSINESS ACTIVITY		-
SECOND: A Notice of Disso (Check box if a		
Department of State.)	ne date of filing: 4/47/2024 5/31/24 e than 90 days after the date this document is filed by the	
Note: If the date inserted in this block doe not be listed as the document's effective d	es not meet the applicable statutory filing requirements, that on the Department of State's records.	niș date wij
Signatures of each general parties or the p	porson appointed pursuant to s. 620.1803(3) or (4), F.S.:	
Filing Fee:	\$52.50	
Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$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 AMELIA ISLAND BEACH RENTALS, LLLP	Limited Partnership:
Description of information that must be included in a claim:	
NAME, ADPRESS, EMGIL ANDRESS, PHO	ING NUMBER
	20
Mailing address where claims can be sent: (Claims cannot be sent to	the Florida Department of State.)
514 S 4TH STREET, APT C, FERNANDINA BEACH, FL 32034	
	P# 2:
	<u> </u>
A claim against the above named limited partnership or limite will be barred unless a proceeding to enforce the claim is con	• • • • • • • • • • • • • • • • • • • •
4 years after the filing of the notice.	
Signature of a general partner or a principal of the successor	entity:
RYAN MONTEIRO	A
Printed Name	Signature

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