A01000013304

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

A01-1304

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

3/16 FL LP diss w/ notice

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

M. HODGES

COVER LETTER

TO: Registration Section
Division of Corporations

Doc. No. A01000001304

SUBJECT: Portofino at Westparc, Ltd.
(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:

A. Tom Harb
(Contact Person)

Portofino at Westparc, Ltd.
(Firm/Company)

3400 34th Street, Third Floor
(Address)

Orlando, FL 32805
(City, State and Zip Code)

For further information concerning this matter, please call:

A. Tom Harb at (407) 422-4272
(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 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

CERTIFICATE OF DISSOLUTION
FOR

Doc. No. A01000001304

Porto Fino at Westpark, 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 9-27-2001, hereby submits this Certificate of Dissolution.

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

All business activities are completed and all assets disposed.

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

THIRD: Effective date, if other than the date of filing: December 31, 2005.

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

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

X _____

X _____

_____

_____

_____

_____

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

06 MAR 16 AM 10:15
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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:

Portofino at Westparc, Ltd.

Description of information that must be included in a claim:

Name of claimant

Amount of claim

Reasons for claim

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

3400 34th Street, Third Floor

Orlando, FL 32805

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:

x AMINE HARB
Printed Name

x
Signature

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