49700000048

(Rec	questor's Name)	<u> </u>
(Add	lress)	
(Add	lress)	
(City	//State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Name	e)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		

Office Use Only

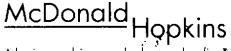


900305207479

11/09/17--01093--013 **210.00

RISHAY 9-AON ZI

O STAMONS NOV 0 9 2017



A business advisory and advocacy law firms

Sonya Thomas, Senior Paralegal E-mail: sthomas@mcdonaldhopkins.com

McDonald Hopkins LLC 300 North LaSalle Street Suite 1400 Chicago, IL 60654

P 1.312.280.0111 F 1.312.280.8232

October 30, 2017

VIA FIRST-CLASS MAIL

State of Florida Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Dear Sir or Madam:

Enclosed for filing are Certificates of Dissolution for four (4) LPs and our check in the amount of \$210.00 to cover the cost of filing of the same.

If you have questions or require additional information, please contact me.

Sincerely,

Sonya Thomas

SONYA THOMAS, Senior Paralegal

ST/ Enclosure

CERTIFICATE OF DISSOLUTION FOR

Segamore Partners, 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 05/09/1997 Florida Department of State on , assigned Florida document number A97000001048 , hereby submits this Certificate of Dissolution. FIRST: Reason for dissolution: (State why partnership is submitting dissolution) The consent of all general partners and of all limited partners. 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. the person appointed pursuant to s. 620.1803(3) or (4), P.S.: Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75

CERTIFICATE OF DISSOLUTION FOR

Sagamore Partners, Ltd.		
(Name of Florida Limited Partnetship 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 05/09/1997, assigned Florida document number A97000001048, hereby submits this Certificate of Dissolution.		
FIRST: Reason for dissolution: (State why partnership is submitting dissolution)		
The consent of all general partners and of all limited partners.		
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.	17 NOV -6 A	
Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.:	AH 11: 18	
SACAHODE GO LLY, JAS G. F.	ii. ii	
VEIL SAZANT, PRESIDENT		
Filing Fee: \$52.50		
Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75		
Certificate of grains (obdonat): 30.12		