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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(В	usiness Entity Nar	me)
(Document Number)		
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FLORIDA DEPARTMENT OF STATE Division of Corporations

March 27, 2018

ALVARO L ADRIAN 2460 SW 137 AVENUE #245 MIAMI, FL 33175

SUBJECT: ADRIANBUILDERS AT TAMIAMI AIRPORT, LTD.

Ref. Number: A0000001103

We have received your document for ADRIANBUILDERS AT TAMIAMI AIRPORT, LTD. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a LIMITED LIABILITY COMPANY - LLC, but your entity is a LIMITED PARTNERSHIP - LTD. Please complete and return the enclosed blank form(s).

There is a balance due of \$27.50.

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) 245-6051.

Stacey M Warren Regulatory Specialist II

Letter Number: 418A00006169

DEPARTMENT OF STATE DIVISION OF CORPORATION TO THE DIVISION OF CORPORATION THE PROPERTY OF THE

RECEIVED 2018 MAY -4 AM II: 3

COVER LETTER

TO: Registration Section
Division of Corporations
SUBJECT: ADRIAN BUILDERS AT JAMIAMI AIRPORT, 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: ADRIAN (Contact Person)
ADRIAN BUILDERS
(Firm/Company)
2460 SW 137 AVE #245
MIAMI FL 33175 (City, State and Zip Code)
For further information concerning this matter, please call:
Michaele De Jirado at (305) 485-550 (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
\$52.50 Filing Fee S61.25 Filing Fee and Certificate of Status \$105.00 Filing Fee Certified Copy, and Certificate of Status \$27.50 due
STREET ADDRESS: Registration Section Division of Corporations Clifton Building P. O. Box 6327 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

(Name of Florida Limited Partnership or Limited Liability Limited Partnership)
(Name of Figure Partnership of Ellined Elability Ellinted 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 07/13/2002, assigned Florida document number 4000 0000 1103, hereby submits this Certificate of Dissolution.
FIRST: Reason for dissolution: (State why partnership is submitting dissolution)
COMPANY FORMED FOR THE CONSTRUCTION OF E
WAREHOUSES AND OFFICE BUILDINGS. PROJECT L
15 COMPLETED. ALL PROPERT SOLD. 5 3
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 least general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.:
AND BUNDERS AT TAMIANI AIRPORT, INC. AWARO L'ADRIAN, Resident
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75