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(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number))
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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COVER LETTER

TO: Registration Section
Division of Corporations
SUBJECT: Viva Capri, LP (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: Neil Larson
(Contact Person)
Viva Capri LP
(Firm/Company)
2008 Goshawk St.
(Address)
San Diego, CA 92123
(City, State and Zip Code)
For further information concerning this matter, please call:
Neil Larson at (858 518-1457 (Name of Contact Person) (Area Code) (Daytime Telephone Number)
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
\$113.75 Filing Fee, and Certificate of Status \$105.00 Filing Fee S113.75 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**

Viva Capri, LP			
(Name of Florida Limited Partnership o	or Limited Liability Limited Partnership)	2020 (12.23	PH 1.
partnership or limited liability limit Florida Department of State on	on 620.1203, Florida Statutes, this Florited partnership, whose certificate was $2/8/2005$, assigned by the certificate was a submits this Certificate.	filed with the gned Florida	
FIRST: Reason for dissolution: (State why partnership is submitting dis	ssolution)	
This entity is no longer needed to do busin	ness.		
SECOND: A Notice of Disso (Check box if a	attached.)		
Department of State.)	e than 90 days after the date this document is not meet the applicable statutory filing requ	filed by the Florida	vill
Signatures of cach general partner or the p	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		