

Division of Corporations

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# A0500000844

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850) 617-6383

From:

Account Name : DEAN, MEAD, EGERTON, BLOODWORTH, CAPOUANO & BOZARTH, P.A.  
Account Number : 076077001702  
Phone : (407) 841-1200  
Fax Number : (407) 423-1831

**DISS/TERM/CANCEL/REV OF LP/LLP  
CARTER-VINELAND POINTE, LLLP**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$105.00

**RECEIVED**

JAN 10 2018

2018 JAN 10 AM 9:10

Electronic Filing Menu

Corporate Filing Menu

Help

JAN 11 2018  
J. HARRIS

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**CERTIFICATE OF DISSOLUTION  
FOR**

Carter-Vineland Pointe, LLP

(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 April 27, 2005, assigned Florida document number A05000000844, hereby submits this Certificate of Dissolution.

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

Consent of the General 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.

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

Vineland Capital GP LLCJohn K. Kuganalela, VP of Manager[Signature]Carter-Vineland Management, IncDarryl M. Carter, President[Signature]

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

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2013 JUN 10 AM 9:10

(((H18000012466.3)))

# **CERTIFICATE OF DISSOLUTION FOR**

Carter-Vineland Pointe, LLLP

(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 April 27, 2005, assigned Florida document number A05000000844, hereby submits this Certificate of Dissolution.

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

Consent of the General 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.

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

Vineland Capital GP LLCJohn Koscusko, VP of Manager

x \_\_\_\_\_

Carter-Vineland Management, IncDani M Carter, President

x \_\_\_\_\_

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

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2018 JAN 10 AM 9:10

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**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:

Carter-Vineland Pointe, LLLP

Description of information that must be included in a claim:

Name of Claimant:

Address of Claimant:

Basis of Claim:

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

Daryl M. Carter

3333 S. Orange Avenue, Suite 200

Orlando, FL 32806

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:

Carter-Vineland Management, Inc.

Daryl M. Carter, President

Printed Name

Signature

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

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2019 JAN 10 AM 9:10