

A05000001384

VIA

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

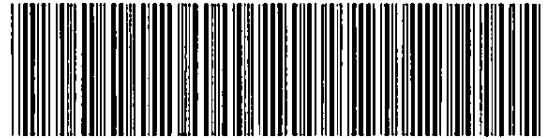
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



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09/25/24--01009--024 \*\*52.50

2024 SEP 25 PM 5:33  
U.S. DEPARTMENT OF JUSTICE  
FEDERAL BUREAU OF INVESTIGATION  
WASHINGTON, DC 20535

Lp

## COVER LETTER

**TO:** Registration Section

Division of Corporations

**SUBJECT:** WEM GROP, 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:

Barbara J. Krasnovc, Esq.

(Contact Person)

Barbara J. Krasnovc, P.A.

(Firm/Company)

5497 Wiles Rd. Suite 206

(Address)

Coconut Creek, Florida 33073

(City, State and Zip Code)

For further information concerning this matter, please call:

Barbara J. Krasnovc

at ( 954 )

227-2277

(Name of Contact Person)

(Area Code)

(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**

WEM GROUP, 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 July 7, 2005, assigned Florida document number A05000001384, hereby submits this Certificate of Dissolution.

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

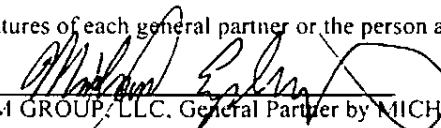
All partners, both general and limited, have given their written consent.

**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.:

  
WEM GROUP, LLC, General Partner by MICHAEL W. ENGELMAN, TRUSTEE, u/a/d 10/23/2013, MGR

  
WEM GROUP, LLC, General Partner by SHERYL A. ENGELMAN, TEE, u/a/d 10/23/2013, MGR

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

2025 SEP 25 PM 5:33  
TALLAHASSEE FL  
FIDELITY

**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:  
WEM GROUP, LTD.

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Description of information that must be included in a claim:

Name and address of claimant. Specific amount of Claim. Account or Statement number,

---

Date of claim. Specific goods or services rendered that give rise to the claim.

---

Name, address, phone number, email address of contact person.

---

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

Barbara J. Krasnove, P.A.

---

5497 Wiles Rd, Suite 206

---

Coconut Creek, Florida 33073

---

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:

WEM GROUP, LLC. General Partner

---

Printed Name

  
Michael W. Engelman TEE, u/a/d 10/23/2013. MGR

  
SHERYL A. ENGELMAN, TEE, u/a/d 10/23/2013.  
MGR

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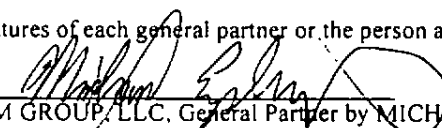
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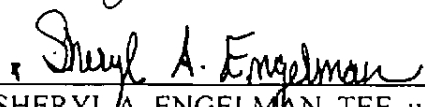
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Printed Name

  
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SHERYL A. ENGELMAN, TEE, u/a/d 10/23/2013,  
MGR