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(Re	equestor's Name)	1140		
(Ad	dress)			
(Ad	ldress)			
(Cit	ty/State/Zip/Phone	⇒ #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	ısiness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to	Filing Officer:			

Office Use Only



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COVER LETTER

TO: Registration Division o	on Section f Corporations				
SUBJECT:(Name	Redwing of Florida Limited Parnersh	Limited Par ip or Limited Liability Lim	rtnership ited Partnership)		
The enclosed Cert	ificate of Dissolution ar	nd fee(s) are submitted	for filing.		
Please return all co	orrespondence concerni	ng this matter to:			
Mich	(Contact Person)				
	(Firm/Company)		SECUL ALL AH	<u>ज</u> हिन्द	1
8769	Escendido W (Address)	ay E.			
Boco	Raton, FL (City, State and Zip Code)	33433		PH 12: 06	
For further inform	ation concerning this m	atter, please call:	•		
Michael (Name of Co	E. Katz ontact Person)	at (<u>541</u>) <u>2</u> (Area Code and D	Naytime Telephone Number	·)	
Enclosed is a chec	k for the following amo	ount:			
\$52.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	S105.00 Filing Fee and Certified Copy	\$113.75 Filing Fee, Certified Copy, and Certificate of Status		
STREET ADDRI Registration Section Division of Corpor Clifton Building 2661 Executive Ce	on rations	MAILING Registration Division of 6 P. O. Box 63 Tallahassee,	Section Corporations 327		

Tallahassee, FL 32301

CERTIFICATE OF DISSOLUTION FOR

Redwing (Name of Florida Limited P	Limited	Partne	.oship	<u>. </u>		
(Name of Florida Limite) P	artnership or Lir	nited Liability	Limited 1	Partnership)	·	_
Pursuant to the provisions of section partnership or limited liability limit Florida Department of State on document number Aoswood Dissolution.	ed partnershij	o, whose cei	tificate	was filed v	vith the	
FIRST: Reason for dissolution: (S	State why part	nership is s	ubmittin	g dissoluti	ion)	
No longer ne	eded.	No activ	ity.	<u> </u>		
		 .		_	- 2 0	<u></u>
		_				hPR
					25 E	_ _ _ _ _
					77.	!
SECOND: A Notice of Disso (Check box if atta		ched.				PH 12: 06
THIRD: Effective date, if other than the o	late of filing:	April	30, 2	015		മ
(Effective date cannot be prior to nor more Department of State.)	than 90 days ay	fter the date th	is docume	ent is filed by	v the Florida	7
Signatures of each general partner of s. 620.1803(3) or (4), F.S.:	or the person a	appointed pu	ırsuant t	0		
Muchael EXIA				 .		_
	_				<u></u>	_
Filing Fee:	\$52.50 \$52.50					_
Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$8,75					

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.

Liability Limited Partnership:	
artnership	·
	ma Seron —▲
lained amount	
	MPR 27 PH 12: 06
	<u> </u>
	<u>13</u>
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force the claim is commenced	
	cannot be sent to the Florida p or limited liability limited force the claim is commenced uccessor entity: Muhad M

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

\$52.50.