

AOS 000001757

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

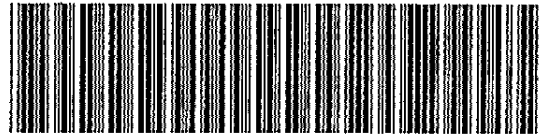
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MAR 2 2007
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AOS-1757
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: THE VIRETTA PRIEST FAMILY LIMITED
(Name of Florida Limited Partnership or Limited Liability Limited Partnership) **PARTNERSHIP**

The enclosed Certificate of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

WES HARVIN, II
(Contact Person)

HARVIN, HARVIN & PINNOCK, LLP
(Firm/Company)

900 E. OCEAN BLVD., STE. 210B
(Address)

STUART, FL 34994
(City, State and Zip Code)

For further information concerning this matter, please call:

WES HARVIN, II at (772) 286-3630
(Name of Contact Person) (Area Code and 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

RECEIVED
DIVISION OF CORPORATIONS
JAN 24 2001
2001 JAN -2 AM 10:42

**CERTIFICATE OF DISSOLUTION
FOR**

THE VIRETTA PRIEST FAMILY LIMITED PARTNERSHIP
(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 09/16/2005, hereby submits this Certificate of Dissolution.

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

CESSATION OF BUSINESS

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.)

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

Alicia P. Esbwin

Manager of The

Viretta Priest Family LLC, General Partner of

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

The Viretta Priest
Family Limited
Partnership

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RECEIVED
FLORIDA DEPARTMENT OF STATE

11/1/05

**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:

THE VIRETTA PRIEST FAMILY LIMITED PARTNERSHIP

Description of information that must be included in a claim:

ANY CLAIM MUST INCLUDE THE NAME OF THE CLAIMANT,
CONTACT INFO AND HOURS OF BUSINESS FOR THE
CLAIMANT & CLAIMANT'S COUNSEL AND A COMPLETE
RECITATION OF ALL PERTINENT FACTS FORMING THE
BASIS OF THE CLAIM

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

HARVIN, HARVIN'S PINNOCK, LLP
ATTN: WES HARVIN, II
900 E. OCEAN BLVD, STE. 210-B
STUART, FL 34994

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:

ALICE GASKINS Alice P. Gaskins
Printed Name Signature

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