

A0500000 2266

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP  WAIT  MAIL

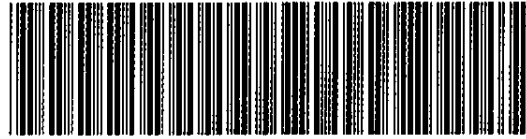
(Business Entity Name)

(Document Number)

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

Special Instructions to Filing Officer:

Office Use Only



000212217590

10/28/11--01006--023 \*\*61.25

**FILED**  
OCT 28 PM 1:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**J. BRYAN**

OCT 31 2011

**EXAMINER**

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** RIE, 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:

Maria Velez

(Contact Person)

Planet Hollywood International Inc.

(Firm/Company)

6052 Turkey Lake Road, Ste 201

(Address)

Orlando, FL 32819

(City, State and Zip Code)

For further information concerning this matter, please call:

Maria Velez

(Name of Contact Person)

at ( 407 ) 903-5513

(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

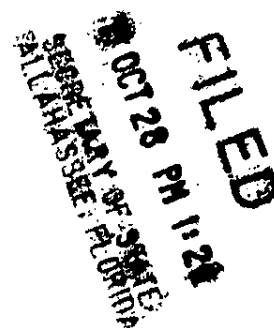
\$113.75 Filing Fee,  
Certified Copy, and  
Certificate of Status

**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



**CERTIFICATE OF DISSOLUTION  
FOR**

RIE 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 DECEMBER 21, 2005, assigned Florida document number A05000002266, hereby submits this Certificate of Dissolution.

**FILED**  
**OCT 28 PM 11:24**  
DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA

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

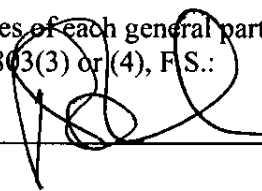
LIMITED PARTNERSHIP NO LONGER CONDUCTING BUSINESS

**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.:

  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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