

A06000000022

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

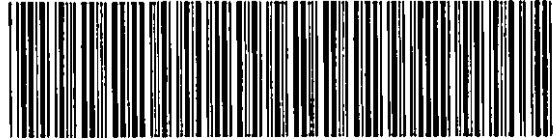
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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05/01/18--01029--016 **52.50

2018 MAY -1 AM 11:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: METH GROUP, L.P.
(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:
SETH E. ELLIS

(Contact Person)
ELLIS LAW GROUP, PL
(Firm/Company)
4755 TECHNOLOGY WAY, SUITE 205
(Address)
BOCA RATON, FL 33431
(City, State and Zip Code)

For further information concerning this matter, please call:

SETH ELLIS at (561) 910-7500
(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

**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:
METH GROUP, LP

Description of information that must be included in a claim:

CLAIMANT MUST PROVIDE A WRITTEN STATEMENT AS TO THE NATURE AND THE AMOUNT
OF ANY CLAIM.

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

SETH E. ELLIS, ESQ. / ELLIS LAW GROUP, PL

4755 TECHNOLOGY WAY, SUITE 205

BOCA RATON, FL 33431

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:

STEPHANIE NEVILLE *President*
Printed Name

Meth Management, Inc
Stephanie Neville, President
Signature

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2018 MAY - 1 AM 11:54

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**CERTIFICATE OF DISSOLUTION
FOR**

METH GROUP, LP

(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 JANUARY 4, 2006, assigned Florida document number A0600000022, hereby submits this Certificate of Dissolution.

FIRST: Reason for dissolution: (State why partnership is submitting dissolution)
CEASED DOING BUSINESS AS OF DECEMBER 31, 2017.

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 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.:

METH MANAGEMENT, INC

By: Stephanie Neville

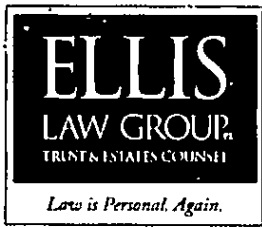
STEPHANIE NEVILLE, President

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2018 MAY -1 AM 11:54

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April 30, 2018

Florida Department of State
Division of Corporations
Clifton Bldg.
2661 Executive Center Circle
Tallahassee, FL 32301


Re: Meth Group, L.P.

To Whom It May Concern:

On Monday, April 30, 2018, we shipped a Federal Express envelope to you with a Certificate of Dissolution for Meth. Group, P.L., a copy of that document is enclosed. We neglected to enclose the filing fee of \$52.50.

Enclosed please find our check in the sum of \$52.50 to file the Certificate of Dissolution for the above-referenced entity. Also enclosed, please find a self-addressed, stamped envelope, to return the previous documents forwarded to you without the check. Thank you.

Sincerely,


Lynn Douglas
Legal Assistant
561-910-7533