A06000001098

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	<u></u> -
PICK-UP WAIT M	IAIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status _	
Special Instructions to Filing Officer:	

Office Use Only

1092-



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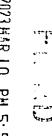
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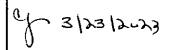
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COVER LETTER

10: Registration Section		
Division of Corporations		
20.00		
SUBJECT: MACSE LLLP	p or Limited Liability Limited Partnership)	
(Name of Florida Limited Partnersh)	p or Limited Liability Limited Partnership?	
The enclosed Certificate of Dissolution and for		
Please return all correspondence concerning t		
Thomas M. Bluth (Contact Perso	nn)	
Stiles Corporation (Firm/Compa		
(Firm/Compa	ny)	
	D - 0	
201 E Las Clas Blod, 1	300	
(Address)		
T+1 1 11 E/3	22 V I	
Fort Lauderdale, FL 3	Code)	
For further information concerning this matte	r, please call:	
-		
The million	0.71 107 0001	
(Name of Contact Person)	At (959) 627 – 928 (Daytime Telephone Number)	
(Cancer Samuel 15 am)	(,	
Enclosed is a check for the following amount		
Enclosed is a check for the following amount	•	
\$52.50 Filing Fee \$61.25 Filing Fee	\$105.00 Filing Fee S113.75 Filing Fee,	
and Certificate of	and Certified Copy Certified Copy, and Certificate of Status	
Status	Certificate of Status	
STREET ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations P. O. Box 6327	
Clifton Building 2661 Executive Center Circle	Tallahassee, FL 32314	

Tallahassee, FL 32301



February 17, 2023

THOMAS M BLUTH 201 E LAS OLAS BOULEVARD 12TH FLR FORT LAUDERDALE, FL 33301

SUBJECT: S/ST. LUCIE PROPERTY, LTD.

Ref. Number: A0400001551

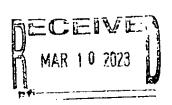
We have received your document for S/ST. LUCIE PROPERTY, LTD. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Claretha Golden Regulatory Specialist II



Letter Number: 723A00003956

CERTIFICATE OF DISSOLUTION FOR

FOR	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;	
(Name of Florida Limited Partnership)	-2023 MAR 1	<u>0</u> РМ 5: 59
Pursuant to the provisions of section 620.1203, Florida Statutes, this Florida partnership or limited liability limited partnership, whose certificate was fit Florida Department of State on 1000 11, 2022 assign document number ACCOOLOGE, hereby submits this Certificate Dissolution.	led with the red Florida	NESSE, FL
FIRST: Reason for dissolution: (State why partnership is submitting diss	solution)	
Do Longer Doing 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 fit Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing require		
not be listed as the document's effective date on the Department of State's records.	emento, em an	
Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or ((4), F.S.:	

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