## A 06000001218

(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



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12/21/23--01030--023 \*\*52.50

2023 DEC 21 - LH 10: 36



## COVER LETTER

TO: Registration Section

Tallahassee, FL 32301

Division of Corporations	
LAS OLAS REAL ESTATE III. SUBJECT:	
(Name of Florida Limited Par	inership or Limited Liability Limited Partnership)
The enclosed Certificate of Dissolution a Please return all correspondence concern Shelley Marciano	<del>-</del>
(Cintac	et Person)
WLD Enterprises, Inc.	
(l'um/	Company)
401 E Las Olas Blvd, Suite 2200	
(Add	(ess)
Fort Lauderdale, FL 33301	
(City, State a	nd Zip Code)
For further information concerning this r	natter, please call:
Shelley Marciano	at ( ) 523-7771 (Area Code) (Daytime Telephone Number)
(Name of Contact Person)	(Area Code) (Daytime Terephone Number)
Enclosed is a check for the following am	ount:
\$52.50 Filing Fee S61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee and Certified Copy Certificate of Status
STREET ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
Clifton Building	P. O. Box 6327
2661 Executive Center Circle	Tallahassee, FL 32314

## CERTIFICATE OF DISSOLUTION FOR

LAS OLAS REAL ESTATE III, LIMITE	ED PARTNERSHIP
(Name of Florida Limited Partnership of	or Limited Liability Limited Partnership)
partnership or limited liability limi Florida Department of State on 10/1	on 620.1203, Florida Statutes, this Florida limited ited partnership, whose certificate was filed with the 18/2006, assigned Florida, hereby submits this Certificate of
FIRST: Reason for dissolution: (	(State why partnership is submitting dissolution)
Winding down partnership	
	2023
SECOND: A Notice of Disso (Check box if a	attached.)
(Effective date cannot be prior to nor mor Department of State.)	re than 90 days after the date this document is filed by the Florida es not meet the applicable statutory filing requirements, this date will
Signatures of each general partner or the p  Muly Mare -  Early of the General	person appointed pursuant to s. 620.1803(3) or (4). F.S.:
Filing Fee:	\$52.50
Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$8.75

## FOR FLORIDA LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP bmitted by the dissolved limited partnership or limited fiabil

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.

NOTICE OF DISSOLUTION

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:

Description of information that must be included in a claim:

Efforts made to collect / contacts used in collection efforts

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

WLD Enterprises, Inc.

401 E Las Olas Blvd., Suite 2200

Fort Lauderdale, FL 33301

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 filling of the notice.

Signature of a general partner or a principal of the successor entity:

Shelley Marciano

Printed Name

Signature

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