

A070000000365

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

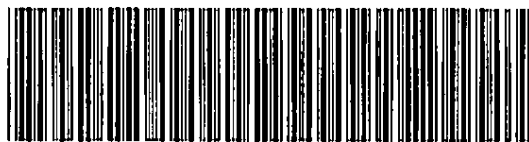
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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08/11/22--01011--021 **52.50

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*Dissolution
w/motice*

50
DOCUMENT

LAW OFFICES
SCHREIDER, WHEELER & FLINT, LLP
1100 PEACHTREE STREET, NE
SUITE 800
ATLANTA, GEORGIA 30309-4516
TELEPHONE: (404) 681-3450
FACSIMILE: (404) 681-1046

August 9, 2022

Via Federal Express

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, Florida 32303

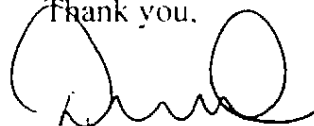
Re: Ingleside Plantation Capital Limited Partnership, Document # A07000000365

Dear Sir/Madam,

Enclosed please find the Florida Department of State Certificate of Dissolution for Ingleside Plantation Capital Limited Partnership. Please also find a check in the amount of \$52.50 to process this request.

Please contact me with any questions or concerns directly at (404) 954-9886

Thank you,



Devin DeVito

Enclosure

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ingleside Plantation Capital Limited Partnership
(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:
Barry L. McGraw

(Contact Person)

Schreeder, Wheeler & Flint, LLP

(Firm/Company)

1100 Peachtree Street, NE, Suite 800

(Address)

Atlanta, GA 30309

(City, State and Zip Code)

For further information concerning this matter, please call:

Barry L. McGraw at (404) 954-9883
(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

MAILING ADDRESS:
Registration Section
Division of Corporations
P. O. Box 6327

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**CERTIFICATE OF DISSOLUTION
FOR**

Ingleside Plantation Capital 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 February 26, 2007, assigned Florida document number A07000000365, hereby submits this Certificate of Dissolution.

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

The happening of an event specified in the partnership agreement

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 will 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.:

[Signature]

[Signature]

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

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**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:
Ingleside Plantation Capital Limited Partnership

Description of information that must be included in a claim:

The claim should include: (i) the name and address of the party making the claim;

(ii) the basis for the claim; and (iii) the amount sought.

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

1348 Fairview Rd NE

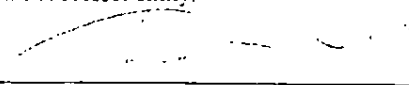
Atlanta, GA 30306

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:

Euro Ingleside Plantation, Inc.

Printed Name


Signature

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