

A07000 000 737

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

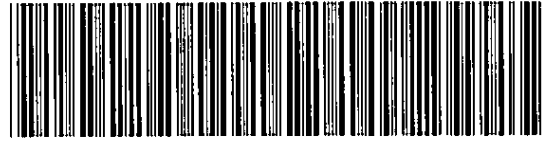
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NOV 26 2019
C.M. McLAIR

COVER LETTER

TO: Registration Section
Division of Corporations

FILED
DIVISION OF CORPORATIONS
19 NOV 22 PM 4:17

SUBJECT: Daniela & Carmelina Fernandez LLP.
(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:

Carlynda Lilly
(Contact Person)

(Firm/Company)

8413 137th Lane N.
(Address)

Seminole FLA 33776
(City, State and Zip Code)

For further information concerning this matter, please call:

Carlynda Lilly at (727) 278-5640
(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

7520
9/8
Check enclosed

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Danilo And Carmelina Fernandez, LLP
(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

The enclosed Notice of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Carlynda Lilly
(Contact Person)

(Firm/Company)

8413 137th Lane N
(Address)

Seminole, FL
(City, State and Zip Code)

For further information concerning this matter, please call:

Carlynda Lilly at (727) 393-3450
(Name of Contact Person) (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

* Previously paid Please see Copy of
Cashed Check.

RECEIVED
DIVISION OF CORPORATIONS
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**CERTIFICATE OF DISSOLUTION
FOR**

DaniJo AND Carmelina Fernandez, LLLP.

(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 6/4/2007, assigned Florida document number A07000000, hereby submits this Certificate of Dissolution.

737

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

- Property in LLLP SOLD MAY 2018

\$ A07 000000 737

SECOND: ☒ 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.:

Carmelina M. lilly

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. *Previously Filed*

Name of Dissolved Limited Partnership or Limited Liability Limited Partnership:

Daniela And Carmelina Fernandez, LLLP.

Description of information that must be included in a claim:

N/A

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

8413 137th Lane N Seminole, FL 33776

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 notice.

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

Daniela Lizby
Printed Name

Daniela Lizby
Signature

Filing Fee: \$52.50
Certified Copy (optional): \$52.50