(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
{ !
(Business Entity Name)
;
(Document Number)
Constitution of Contract
Certified Copies Certificates of Status
1
Special Instructions to Filing Officer:

A. LUNT

JUL 13 2009

EXAMINER

Office Use Only



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COVER LETTER

TO: Registration Division of	n Section Corporations			
SUBJECT:(Name of	ENTERNATION Florida Limited Partnersh	ONAL MEAL (OMPANY, LP	
The enclosed Certi	ficate of Dissolution an	nd fee(s) are submitted		
Please return all co	rrespondence concerni	ng this matter to:	DO9 JUI SECKE ALLAI	•
Fati	ma Kiersk (Contact Person)	<u> </u>	2009 JUL 10 PM 1: 23 SECKETARY OF STATE TALLAHASSEE, FLORIG	١
	ional Meal Co (Firm/Company)		M 1:23	
70/ Br	ickell Avenu (Address)	re, Suite 128	0	
Miam	Florida (City, State and Zip Code)	33/3/		
For further informa	ation concerning this ma	atter, please call:		
Fatim	a Klerski	_at (<u>786</u>) <u>4</u>	23/- 4200 Paytime Telephone Number)	
	ntact Person) c for the following amo		aytime Telephone Number)	
Enclosed is a circo.	t for the following amo			
\$52.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status		☐ \$113.75 Filing Fee, Certified Copy, and Certificate of Status	
STREET ADDRE Registration Section Division of Corporal Clifton Building 2661 Executive Ce Tallahassee, FL 32	n ations nter Circle	MAILING Registration Division of G P. O. Box 63 Tallahassee,	Section Corporations 327	

CERTIFICATE OF DISSOLUTION FOR

INTERNATI (Name of Florida Limited Par	ONAL 1	MEAL	COMP	ANY,	LP	
(Name of Florida Limited Par	tnership or Limite	d Liability L	imited Partr	nership) ´		
Pursuant to the provisions of section partnership or limited liability limited Florida Department of State on Nordocument number A O 8 0000000 Dissolution.	d partnership, v Vember 21	hose certi	ficate was	filed with gned Flor	the	
FIRST: Reason for dissolution: (State why partnership is submitting dissolution)						
Since the t	formation	n of	the	LP,	40	
Since the tobusiness was or in Florida by	- will	be	tran.	sacte	?d	
in Florida by	this	LP				
/				Ž	2005 SEI	
SECOND: A Notice of Dissolution (Check box if attack		i.		HNASSEE, P	JUL 10 PM	
THIRD: Effective date, if other than the da	te of filing:			<u>5</u>	S	
(Effective date cannot be prior to nor more to Department of State.)	han 90 days after	the date this	document is	s filed by	Florida .	
Signatures of each general partner or s. 620.1803(3) or (4), F.S.:	the person app	ointed pur	suant to			
	\$52.50 \$52.50 \$8.75					

STATEMENT OF TERMINATION FOR

TNTERNATIONAL MEAL COMPANY, 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 November 21, 2008, hereby submits this Statement of Termination.				
The limited partnership or limited liability limited partnership has completed winding up its affairs and wishes to file a statement of termination.				

Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.:	SECRETAR TALLAHASS	7
	33.00 J	1
		111
	SEZ : ₹	0
	——————————————————————————————————————	

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