

A09000000440

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

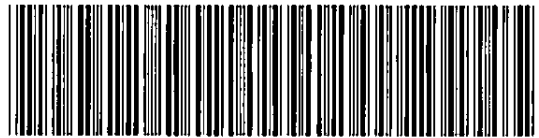
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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10/16/17--01007--001 **105.00

FILED
OCT 16 AM 10:06
TALLAHASSEE, FLORIDA

FILED
OCT 16 AM 7:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SUNSHINE CORPORATE FILING OF FLORIDA INC.

3458 Lakeshore Drive

Tallahassee, Florida 32312

(850) 656-4724

DATE 10-16-17
****WALK IN****

ENTITY NAME GRANITE OPPORTUNITY FUND LLP

DOCUMENT NUMBER (Dee UCS)

****PLEASE FILE THE ATTACHED AND RETURN****

____ Plain Copy
XX Certified Copy
____ Certificate of Status

****PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY****

____ Certified Copy of Arts & Amendments
____ Certificate of Good Standing

****APOSTILLE' / NOTARIAL CERTIFICATION****

COUNTRY OF DESTINATION _____
NUMBER OF CERTIFICATES REQUESTED _____

TOTAL \$ OWED 105.00
CHECK # 4138

Please call Tina at the above number for any issues or concerns. Thank you so much!

**CERTIFICATE OF DISSOLUTION
FOR**

Granite Opportunity Fund, 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 June 25, 2009, assigned Florida document number A09000000440, hereby submits this Certificate of Dissolution.

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

The consent of the General Partner and all of the Limited Partners, per Partnership Agreement.

SECOND: ☒ A Notice of Dissolution is attached.
(Check box if attached.)

THIRD: Effective date, if other than the date of filing: October 16, 2017
(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.:

GENERAL PARTNER:

Granite Growth 45, L.L.C.

By: Louis J. Doya

Name: Louis J. Doya

Title: Secretary

Filing Fee: \$52.50

Certified Copy (optional): \$52.50

Certificate of Status (optional): \$8.75

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17 OCT 16 AM 7:10
STATE TARY OF STATE
TALLAHASSEE, FLORIDA

**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:
Granite Opportunity Fund, LLLP

Description of information that must be included in a claim:

Name, address & e-mail address of claimant

Reason for claim

Amount of claim

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

Granite Opportunity Fund, LLLP

225 Banyan Banyan Boulevard, Suite 130

Naples, FL 34102

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:

GENERAL PARTNER:

Granite Growth 45, LLC

By: Louis J. Boyd, Secretary

Printed Name

Signature

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

FILED
17 OCT 16 AM 7:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA