

A10 000 000 300

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

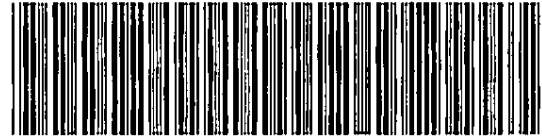
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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12/19/22--01026--007 **61.25

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2022 DEC 19 AM 10:24

SECRETARY OF STATE
TALLAHASSEE, FL

Dissolution

MAR 08 2023

D CUSHING

COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: GDS Enterprises, LLLP

(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:

Marc Stanley, Esquire

(Contact Person)

(Firm/Company)

711 Intracoastal Drive

(Address)

Fort Lauderdale, FL 33304

(City, State and Zip Code)

For further information concerning this matter, please call:

Marc Stanley

at (954) 410-1838

(Name of Contact Person)

(Area Code)

(Daytime Telephone Number)

SECRETARY OF STATE
TALLAHASSEE, FL

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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

**CERTIFICATE OF DISSOLUTION
FOR**

GDS Enterprises, L.L.P.

(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 4/19/2005, assigned Florida document number A10000000306, hereby submits this Certificate of Dissolution.

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

Purpose of the business has been achieved. No further business is to be conducted.

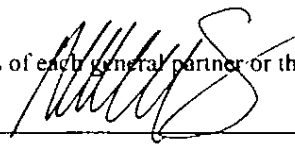
SECOND: A Notice of Dissolution is attached.
(Check box if attached.)

THIRD: Effective date, if other than the date of filing: 12/31/2022
(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.

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TALLAHASSEE, FL

Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.:



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