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(Re	equestor's Name)			
(Ad	dress)			
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(Cit	ty/State/Zip/Phone	<i>#</i>)		
PICK-UP	☐ WAIT	MAIL MAIL		
(Bu	siness Entity Nam	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only



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FLORIDA DEPARTMENT OF STATE Division of Corporations

March 25, 2020

SUSAN ROMANO 3370 NE 190TH ST, #2408 AVENTURA, FL 33180

SUBJECT: ROMANO FAMILY HOLDINGS, L.P.

Ref. Number: A10000000685

We have received your document and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

A CERTIFICATE OF DISSOLUTION MUST BE COMPLETED ALONG WITH THE NOTICE OF DISSOLUTION WHICH HAVE BEEN PROVIDED. PLEASE COMPLETE ACCORDINGLY.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Susan Tallent Regulatory Specialist II

Letter Number: 120A00006474

COVER LETTER

TO:	Registration	Section		
Divisio	on of Corpora	tions		
SUBJI	ECT: ROMAN	NO FAMILY HOLDINGS		ity Limited Partnership)
Please		icate of Dissolution ar respondence concerni		-
		(Contact	(Person)	
ROMA	NO FAMILY H	IOLDINGS, L.P.		
		(Firm/C	ompany)	
3370 N	E 190H ST, #24	08		
		(Addr	ess)	
AVENT	ΓURA, FL 3318	0		
		(City, State an	d Zip Code)	
For fur	ther informa	tion concerning this m	atter, please call	:
SUSAN	ROMANO		305 at (987-5082
	(Name	of Contact Person)	(Area Code	(Daytime Telephone Number)
Enclos	sed is a check	for the following amo	ount:	
\$52.	50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	S105.00 Filing and Certified	
STRE	ET ADDRE	SS:		LING ADDRESS:
Registration Section		Registration Section		
	on of Corpora 1 Building	HUONS	Division of Corporations P. O. Box 6327	

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

CERTIFICATE OF DISSOLUTION FOR

ROMANO FAMILY HOLDINGS, L.P.	
(Name of Florida Limited Partnership or	Limited Liability Limited Partnership)
	d 620.1203, Florida Statutes, this Florida limited ed partnership, whose certificate was filed with the /2010, assigned Florida, hereby submits this Certificate of
FIRST: Reason for dissolution: (S	tate why partnership is submitting dissolution)
PARTNERSHIP IS NO LONGER VIABL	.E
	· · · · · · · · · · · · · · · · · · ·
SECOND: A Notice of Dissol (Check box if at	
Department of State.)	s not meet the applicable statutory filing requirements, this date will
Signatures of each general partner or the process of the process o	erson appointed pursuant to s. 620.1803(3) or (4), F.S.:
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75

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.

SUSAN ROMANO

Certified Copy (optional):

Filing Fee:

Printed Name

Name of Dissolved Limited Partnership or Limited Liability Limited Partnership:

ROMANO FAMILY HOLDINGS, L.P.

Description of information that must be included in a claim:

ANYTHING PERTINENT TO THE CLAIM

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

3370 NE 190TH STREET, #2408, AVENTURA, FL 33180

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:

\$52.50

\$52.50