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

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TO: Registration Section	
Division of Corporation:	
SUBJECT: Merto Lofts, LTD (Name of Florida Limited P	artnership or Limited Ciability Limited Partnership)
The enclosed Certificate of Dissolution Please return all correspondence concer Nicholas V. Pulignano, Jr.	
(Con	tact Person)
Marks Gray, P.A.	
(Fire	и/Соправу)
1200 Riverplace Blvd., Suite 800	
(A)	ddress)
Jacksonville, FL 32207	
(City, State	and Zip Code)
For further information concerning this	matter, please call:
Nicholas V. Pulignano, Jr.	904 807-2105 at ()
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following an	mount:
■\$52.50 Filing Fee S61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee and Certified Copy Certified Copy, and Certificate of Status
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations Clifton Building	Division of Corporations

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

P. O. Box 6327 Tallahassec, FL 32314

CERTIFICATE OF DISSOLUTION FOR

Merto Lofts, LTD	
(Name of Florida Limited Partnership or	r Limited Liability Limited Partnership)
partnership or limited liability limited	n 620.1203, Florida Statutes, this Florida limited ed partnership, whose certificate was filed with the 21, 2011, assigned Florida, hereby submits this Certificate of
FIRST: Reason for dissolution: (S	State why partnership is submitting dissolution)
No longer conducting business; dissolution	n has been consented to by the general partners
and all limited partners	
SECOND: A Notice of Dissol (Check box if a	
Department of State.)	e than 90 days after the date this document is filed by the Florida s not meet the applicable statutory filing requirements, this date wi
Signatures of each general partner or the public Allan Allan Allan Liliane Welty, as President of LV General Partner	V_Jax, Inc.
Ochçiai i armei	
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.

Name of Dissolved Limited Partnership or Lin Meno Lofts, LTD	nited Liability Limited Partnership:
Description of information that must be includ	ed in a claim:
Date of contracts and transactions, details of basis for c	laim and amounts claimed
Mailing address where claims can be sent: (Cla	ims cannot be sent to the Florida Department of State.)
Liliane Welty	
4521 Ortega Blvd	· · · · · · · · · · · · · · · · · · ·
Jacksonville , FL 32210	
A claim against the above named limited parts will be barred unless a proceeding to enforce £ 4 years after the filing of the notice.	•
Signature of a general partner or a principal of	the successor entity:
Liliane Welty	High Wille
Printed Name	Signature

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

\$52.50.