

A11000000569

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

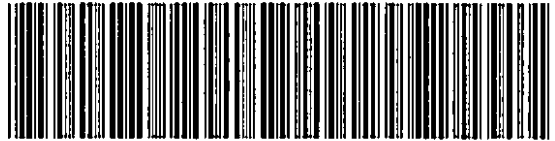
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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CLERK OF COURT
FAMILY DIVISION, ITOP

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MICHAEL D. TANNENBAUM

Attorney at Law

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TELEPHONE (561) 471-1406

FAX (561) 683-7551

January 10, 2022

Via USPS Priority Mail

Florida Department of State
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Engelsen Associates, Ltd.

Dear Sir or Madam:

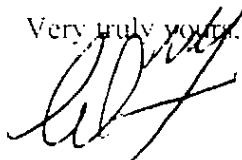
Enclosed please find the following documents:

1. Original and one copy of Certificate of Dissolution for Engelsen Associates, Ltd.
2. Check in the amount of \$61.25 for the filing fee (\$52.50) and a Certificate of Status (\$8.75).
3. Self-addressed stamped envelope.

Kindly file the above document and return a Certificate of Status in the envelope provided.

Thank you for your cooperation in this matter. If you have any questions, please contact me.

Very truly yours,



MICHAEL D. TANNENBAUM

MDT/pr
Enclosures

**CERTIFICATE OF DISSOLUTION
FOR**

ENGELSEN ASSOCIATES, LTD.

(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 July 29, 2011, assigned Florida document number A11000000569, hereby submits this Certificate of Dissolution.

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

The purpose for which the partnership was formed no longer exists

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

THIRD: Effective date, if other than the date of filing: _____
(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.:

Howard B. Engelsen

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

CLERK OF STATE
TALLAHASSEE, FLORIDA

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AND
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