

A120000000438

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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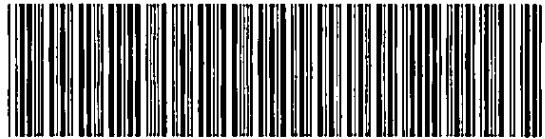
(Business Entity Name)

(Document Number)

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2018 NOV 13 AM 9:59
SECRETARY OF STATE
TALLAHASSEE, FL

JOHN J. PALMERI
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*Taxation

†Also Admitted in New York

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john@palmerilaw.com

November 5, 2018

CERTIFIED MAIL

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

Re: Dissolution of Delfavero Florida LLLP

To Whom It May Concern:

Enclosed please find a Certificate of Dissolution for the above referenced Florida LLLP. Also enclosed please find Cover Letter form and a check in the amount of \$105.00 payable to the Florida Department of State.

Please accept the enclosed for processing with your office.

Please return a filing receipt for and certified copy of the Certificate at your earliest convenience.

Thank you for your cooperation.

Very truly yours,



John J. Palmeri
Enclosures
JJP/mp

COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: DELFAVERO FLORIDA, 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:

John J. Palme

(Contact Person)

John J. Palmeri, Attorney at Law, LLC

(Firm/Company)

P.O. Box 297

(Address)

Cheshire, CT 06410

(City, State and Zip Code)

For further information concerning this matter, please call:

John J. Palmeri

(Name of Contact Person)

at (

203

(Area Code)

699-9132

(Daytime Telephone Number)

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**

FILED

2018 NOV 13 AM 9: 59

DELFAVERO FLORIDA, LLLP

(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

**SECRETARY OF STATE
TALLAHASSEE, FL**

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 08/01/2012, assigned Florida document number A12000000438, hereby submits this Certificate of Dissolution.

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

Discontinued business and distributed remaining assets to partners.

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

THIRD: Effective date, if other than the date of filing: ^{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.:

X

Laureen Seoane

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