## Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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: (850)617-6383

From:

Account Name : ROGERS, TOWERS, BAILEY, ET AL

Account Number : 076666002273 Phone : (904)398-3911 Fax Number : (904)396-0663

## DISS/TERM/CANCEL/REV OF LP/LLP TANSTAAFL ONE, LLLP

Certificate of Status	0
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Page Count	02
Estimated Charge	\$52.50

TAUGH AMIL: 49

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AUG 1 4 2017

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## CERTIFICATE OF DISSOLUTION FOR

	ANSTAAFL ONE, LLLP	
(Name of Florida Limited Par	tnership or Limited Liability Limited Partnership)	
partnership or limited liability limited Florida Department of State on	620.1203, Florida Statutes, this Florida limited I partnership, whose certificate was filed with the Ianuary 16, 2014, assigned Florida 2, hereby submits this Certificate of	
FIRST: Reason for dissolution: (St	ate why partnership is submitting dissolution)	
The resolution to dissolve the partnershi	p was adopted on March 7, 2017 by written consent of the	
sole general and limited partner of the pa	artnership.	
SECOND:  A Notice of Dissol	ution is attached	17 /
(Check box if attac	hed.)	aug Bull
	33	_
THIRD: Effective date, if other than the de	ite of filing:	A±
(Effective date cannot be prior to nor more Department of State.)	than 90 days after the date this document is filed by the Florida	THIN IT SON
Signatures of each general partner or 8, 620 803(3) op (4), F.S.:	the person appointed pursuant to	Ò.
Zi Alle-		
	_	
Filing Fee:	\$52.50	
Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$8.75	
Ser transfer or Seaton (Stransmit)	****	

## 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.

Dissolution.			
Name of Dissolved Limited Partnership or Limited Liability Limited Partnership:			
Tanstaafl One, LLLP		_•	
Description of information that must be included in a claim:			
Name, address and phone number of Claimant;		_	
The amount of the claim;	<del>``</del>		
The date the claim arose; and		17 AL	
A description of the nature of the claim in sufficient detail	7.75 7.85	<u> </u>	,
Mailing address where claims can be sent: (Claims cannot be sent to the Florida Department of State.)	1077.33	61:FI WW	-
Lee S. Neviaser	<u> 5</u> -	1	
4005 Clearwater Lane		_	
Jacksonville, FL 32223		_	
		<del></del>	
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 4 years after the filing of the notice.	d within		
Signature of a general partner or a principal of the successor entity:	1		
Lee S. Neviaser  Printed Name  Signature			
rrined Name Sgrature			

Fee: No charge if included with Certificate of Dissolution. If filed separately, \$52.50.