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| (Re | equestor's Name) |
|-------------------------|--------------------------|
| | ddress) |
| (Ac | idress) |
| (Cit | ty/State/Zip/Phone #) |
| | |
| (Bu | usiness Entity Name) |
| (Do | ocument Number) |
| Certified Copies | _ Certificates of Status |
| Special Instructions to | Filing Officer: |
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| | Office Use Only |

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12/12/24--01013--009 **113.75

COVER LETTER

TO: Registration Section

Division of Corporations

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SUBJECT: _____

(Nume 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: Alissia De Grazia

(Contact Person)

Levy Salis LLP

(Firm/Company)

2047 Mansfield Street, 3rd Floor

(Address)

Montreal, Quebec, H3A 1Y7, Canada

(City, State and Zip Code)

For further information concerning this matter, please call:

Alissia De Grazia _______at (______) 940-80078 _______ (Name of Contact Person) _______(Area Code) ______(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

AM & G FLORIDA, LP

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(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 December 29, 2014 _____, assigned Florida document number A14000000758 , hereby submits this Certificate of Dissolution.

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

Unwinding of entity activities.

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

THIRD: Effective date, if other than the date of filing: November 12, 2024

(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).4r (4), F.S.:

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