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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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COVER LETTER

Registration Section TO:

Division of Corporations

• • •

SUBJECT: LIVERPOOL FC AMERICA OF FLORIDA, LP

The enclosed Certificate of Dissolution and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: GREG BERTRAND, ESQ.

	(Contact	(Person)	
BERTRAND LAW FIR	M, PC		
<u> </u>	(Firm/C	(ompany)	
1278 FM 407. SUITE 1	09		
	(Addr	ess)	
LEWISVILLE, TX 750	77		
	(City, State ar	nd Zip Code)	
For further informat	ion concerning this n	natter, please call:	
GREG BERTRAND		972 839-4	· · · · · · · · · · · · · · · · · · ·
(Name c	of Contact Person)	(Area Code) (Day	time Telephone Number)
Enclosed is a check	for the following am	ount:	
\$52.50 Filing Fee	S61.25 Filing Fee and Certificate of Status	S105.00 Filing Fee and Certified Copy	St 13.75 Filing Fee, Certified Copy, and Certificate of Status
STREET ADDRESS:		MAILING A	
Registration Section Division of Corporations		Division of Corporations	
Clifton Building		P. O. Box 63 Tellahagana	
2661 Executive Cer Tallahassee, FL 32		Tallahassee,	FL 32314

CERTIFICATE OF DISSOLUTION FOR

LIVERPOOL FC AMERICA OF FLORIDA, LP

(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 <u>April 2, 2015</u>, assigned Florida document number <u>A15000000220</u>, hereby submits this Certificate of Dissolution.

is submitting dissolution)
EB T
122 FE
0710 5:51

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.:

Manna QF yole

Filing Fee:\$52.50Certified Copy (optional):\$52.50Certificate of Status (optional):\$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 Limited Liability Limited Partnership: LIVERPOOL FC AMERICA OF FLORIDA, LP

Description of information that must be included in a claim: (1) DATE OF CLAIM; (2) NATURE OF CLAIM; (3) AMOUNT OF CLAIM;		19 FEB 2	
(4) INVOICE OR OTHER DOCUMENTS EVIDENCING THE VALIDITY OF SUCH C	LAIMO	- P	-E
(5) NAME, TELE. NO. AND ADDRESS OF CONTACT PERSON TO DISCUSS CLAIN	4. 03	្រុំហ៊	
Mailing address where claims can be sent: (Claims cannot be sent to the Florida Departmen	t of State.)	¶ -↓

7801 MAIN STREET, THE COLONY, TX 75056; ATTN: PETER BRODY

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 within 4 years after the filing of the notice.

Signature of a general partner or a principal of the successor entity: Liverprol Florida Magant, mc. By Refer Brady, Rog Printed Name Signature

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