

A15000000545

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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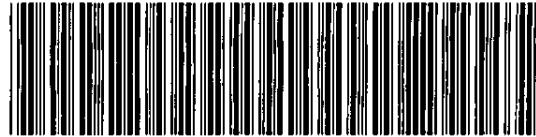
(Business Entity Name)

(Document Number)

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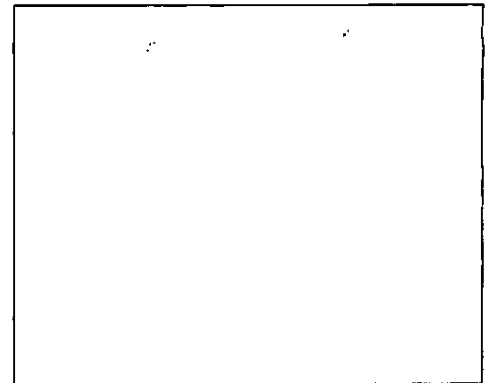
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ENTITY NAME:

SANFORD INVESTMENTS LLLP

CH# 7961 FOR \$105.00

PLEASE FILE THE ATTACHED STATEMENT OF TERMINATION & RETURN
THE FOLLOWING:

XXX CERTIFIED COPY

___ STAMPED COPY

___ CERTIFICATE OF STATUS

Examiner's Initials

STATEMENT OF TERMINATION

FOR SANDIFORD INVESTMENTS, LLLP

Pursuant to provisions of § 620.1203 of the Florida Statutes, the undersigned, desiring to submit the Statement of Termination of Sandiford Investments, LLLP, hereby swears to and affirms as follows:

1. The name of the Limited Liability Limited Partnership is SANDIFORD INVESTMENTS, LLLP.
2. The Certificate of Limited Liability Limited Partnership (which was initially known as the Certificate of Limited Partnership) was filed on July 29, 2015.
3. The reason for filing the Statement of Termination is as follows:

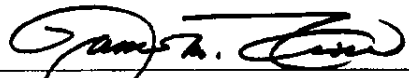
The limited liability limited partnership has completed winding up its affairs and wishes to file a statement of termination.

4. Effective date, if other than date of filing: Upon filing with the Florida Department of State.

IN WITNESS WHEREOF, the undersigned has executed this Statement of Termination on the 9 day of April, 2018, effective upon filing same with the Florida Department of State.

SANDIFORD INVESTMENTS, LLLP

BY: SANDIFORD FAMILY TRUST, General Partner

By: 
James Finn, Trustee

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