

A15000000744

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

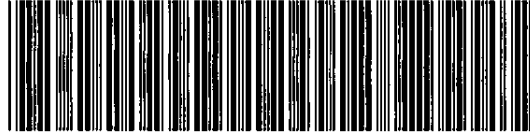
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300280863843

300280863843
01/20/16--01004--008 **25.00

05/04/16--01030--021 **27.50

FILED
16 MAY -4 AM 7:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAY 04 2016

Y SULKER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 25, 2016

CAMMIE WARBURTON
2248 MERIDIAN BLVD SUITE H
MINDEN, NV 89423 US

SUBJECT: ISLAND SNOW HOLDINGS LP
Ref. Number: A15000000744

We have received your document for ISLAND SNOW HOLDINGS LP and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

There is a balance due of \$27.50.

We are enclosing the proper form(s) with instructions for your convenience. *

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker
Regulatory Specialist II

Letter Number: 516A00001566

** The form provided is identical to the
form submitted*

2016 APR 28 PM 1:10
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: ISLAND SNOW HOLDINGS LP
(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:

CAMMIE WARBURTON
(Contact Person)
CORPORATE DIRECT, INC.
(Firm/Company)
348 MILL STREET
(Address)
RENO, NV 89501
(City, State and Zip Code)

For further information concerning this matter, please call:

CAMMIE WARBURTON at (775) 284-7162
(Name of Contact Person) (Area Code and 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**

Island Snow Holdings 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 11/18/2015, assigned Florida document number A15000000744, hereby submits this Certificate of Dissolution.

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

No longer proceeding

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.)

Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.:

[Signature]

Manager of GENERAL PARTNER

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

FILED
16 MAY -4 AM 7:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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:

Island Snow Holdings LP

Description of information that must be included in a claim:

Mailing address where claims can be sent: (Claims cannot be sent to the Florida Department of State.)

39 Prominence Path SW

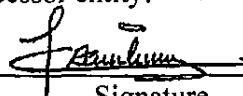
Calgary, Alberta Canada T3H 2W7

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:

LYNDDY GARRIDO MANAGER OF GENERAL PARTNER

Printed Name



Signature

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

FILED
16 MAY -4 AM 7:09
CLERK OF STATE
TALLAHASSEE, FLORIDA