

11/10/21, 1:36 PM

Division of Corporations

A 16 000000 450

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000417164 3)))



H210004171643ABC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (614)280-3338
Fax Number : (954)208-0845

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2021 NOV 10 AM 10:17

**DISS/TERM/CANCEL/REV OF LP/LLP
SEVILLE CAPITAL - ARLINGTON II LP**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$52.50

NOV 12 2021

A. LUNY

2021 NOV 10 PM 2:02

ALL ABANDONED

Electronic Filing Menu

Corporate Filing Menu

Help

CERTIFICATE OF DISSOLUTION FOR

Seville Capital - Arlington II L.P.

(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 08/31/2016, assigned Florida document number A16000000450, hereby submits this Certificate of Dissolution.

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

Ceasing to transact business

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.:

Jonathan Sigler

Jonathan Sigler on behalf of Seville Capital - Arlington II GP Inc General Partner

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

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 2021 NOV 10 AM 10:17

**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:
SEVILLE CAPITAL - ARLINGTON II LP

Description of information that must be included in a claim:

n/a

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

681 William Montreal, Quebec H3C 0T9 CA

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:

JONATHAN SIGLER

Printed Name



Signature

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
2021 NOV 10 AM 10:17