

A160000000694

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

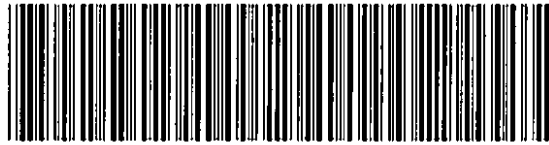
(Document Number)

Certified Copies \_\_\_\_\_

Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100416971691

FILED

2023 OCT -9 AM 9:17

PROFESSOR OF STAFF  
TALLAHASSEE, FLORIDA

RECEIVED

2023 OCT -9 PM 3:30

PROFESSOR OF STAFF  
TALLAHASSEE, FLORIDA

**CT CORP**  
**(850)656-4724**  
**3458 Lakeshore Drive,**  
**Tallahassee, FL 32312**

**Date:** 10/09/2023

Acc#120160000072

*mic SW*

Name:	L'UCCELLO INVESTMENTS, LP
Document #:	
Order #:	15161406

Certified Copy of Arts & Amend:	<input type="checkbox"/>		
Plain Copy:	<input type="checkbox"/>		
Certificate of Good Standing:	<input type="checkbox"/>		
Certified Copy of	<input type="checkbox"/>		
Apostille/Notarial Certification:	<input type="checkbox"/>	Country of Destination:	
		Number of Certs:	

Filing: <input checked="" type="checkbox"/>	Certified: <input type="checkbox"/>
	Plain: <input checked="" type="checkbox"/>
	COGS: <input type="checkbox"/>

Email Address for Annual Report Notifications:

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Availability _____
Document _____
Examiner _____
Updater _____
Verifier _____
W.P. Verifier _____
Ref# _____

Amount: \$ **52.50**

Thank you!



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 10, 2023

CT

SUBJECT: L'UCCELLO INVESTMENTS, LP  
Ref. Number: A16000000694

**CORRECTED**  
**Please Allow For**  
**Same File Date**

We have received your document for L'UCCELLO INVESTMENTS, LP and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

A Statement of Termination may be filed after the limited partnership or limited liability limited partnership has completed winding up and after a voluntary dissolution has been filed with this office. See section 620.1203(3), Florida Statutes for reference.

The name and date on the Statement of Termination is not legible.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan  
Regulatory Specialist III

Letter Number: 923A00023395

**RECEIVED**  
OCT 26 PM 3:11  
DIRECTOR'S OFFICE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DISSOLUTION  
FOR**

**L'UCCELLO INVESTMENTS, LP**

(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

**FILED**  
**2023 OCT -9 AM 9:17**

**DEPARTMENT OF STATE  
TALLAHASSEE, FLORIDA**

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 12/09/2016, assigned Florida document number A16000000694, hereby submits this Certificate of Dissolution.

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

The Limited Partner and General Partner have authorized the Dissolution of the Partnership in

accordance with the Limited Partnership Agreement.

**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.:

L'UCCELLO GP, LLC, a Florida limited liability company, as General Partner

DocuSigned by:  
By: Joseph P. Genova  
Joseph P. Genova, Manager

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

**NOTICE OF DISSOLUTION  
FOR  
FLORIDA LIMITED PARTNERSHIP  
OR LIMITED LIABILITY LIMITED PARTNERSHIP**

**FILED**

**2023 OCT -9 AM 9:17**

**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

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:  
L'UCCELLO INVESTMENTS, LP

Description of information that must be included in a claim:

1. Full name and address of claimant.

2. Brief statement of the claim, including the date the claim arose and the amount of the claim,

accompanied by a copy of all relevant documentation such as purchase orders or contracts and invoices.

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

145 Haist Ave, Unit 8

Vaughan, ON L4L 5V1 CA

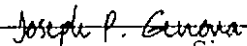
A claim against the above named limited partnership or limited liability limited partnership will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of the notice.

Signature of a general partner or a principal of the successor entity:  
L'UCCELLO GP, LLC, a Florida limited liability company, as General Partner

Joseph P. Genova, Manager

Printed Name

DocuSigned by:



ACA087AA5E2AA1

Signature

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