A17000000161

(Requestor's Name)
(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
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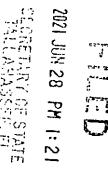


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COVER LETTER

_	on Section • of Corporations	,
SUBJECT: Magi	c Reserve EB-5 Fund, LP	
	e of Florida Limited Partnershi	p or Limited Liability Limited Partnership)
The enclosed No	tice of Dissolution and fe	e(s) are submitted for filing.
Please return all	correspondence concernir	ig this matter to:
Giulianna Orsetti		
	(Contact Person)	
Magic Companies (Group LLC	
	(Firm/Company)	
7430 Brooklyn Driv	/e	
	(Address)	
Kissimmee, FL 347	47	
	(City, State and Zip Code)	202 Ser.
For further infor	mation concerning this ma	atter, please call: 28
Giulianna Orsetti		at ()
(Name	of Contact Person)	(Area Code and Daytime Telephone; Number 12
Enclosed is a che	eck for the following amo	unt: Pin 2
■ \$52.50 Filing Fe	re	☐ \$105.00 Filing Fee and Certified Copy Certified Copy, and Certificate of Status
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



June 8, 2021

GIULIANNA ORSETTI MAGIC COMPANIES GROUP LLC 7430 BROOKLYN DRIVE KISSIMMEE, FL 34747

SUBJECT: MAGIC RESERVE EB-5 FUND, LP

Ref. Number: A17000000161

We have received your document for MAGIC RESERVE EB-5 FUND, LP and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The limited partnership must complete and submit a Certificate of Dissolution along with the attached Notice of Dissolution in order to dissolve a Florida limited partnership or limited liability limited partnership on our records. The fee to file both the Certificate of Dissolution and Notice of Dissolution is \$52.50.

The document must be signed by all of the general partners or the person appointed pursuant to s. 620.1803(3) or (4), Florida Statutes, to wind up the partnership's affairs.

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) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 721A00012427

www.sunbiz.org

CERTIFICATE OF DISSOLUTION FOR

Marc Reserve EB-5 Fund, W
(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 04105 12017, assigned Florida document number A17000000161, hereby submits this Certificate of Dissolution.
FIRST: Reason for dissolution: (State why partnership is submitting dissolution)
no activity
SECOND: A Notice of Dissolution is attached. (Check box if attached.)
THIRD: Effective date, if other than the date of filing: 06/23/2021 (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) of (4); F.S.:
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75