## A20000000034

(Requestor's Name)		
(Address)		
(Äddress)		
(City/State/Zip/Phone #)		
,		
PICK-UP WAIT	MAIL	
(Business Entity Name)		
, ,		
(Document Number)	<u> </u>	
Certified Copies Certificates of S	Status	
Special Instructions to Filing Officer:		
Q <u>4</u> 52.5°		

Office Use Only

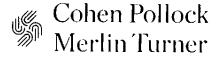


600446484206

03/28/25--010/22--021 1152/50

MAY 0 9

S. PRATHER



Theresa Mercure direct (770) 857-4760 fax (770) 857-4761 tmercure@cpmtlaw.com

March 25, 2025

## VIA FEDEX (Tracking # 880063745579)

Division of Corporations Florida Department of State 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

Re: 4 MORE CAPITAL PARTNERS LP

Document Number: A2000000034

Our File # # 284341

Dear Madam or Sir:

Enclosed for filing is an original, executed Certificate of Dissolution and our firm check in the amount of \$52.50. Please return the file-stamped original in the enclosed prepaid envelope.

Thank you for your assistance with this matter.

Regards,

Theresa Mercure

Paralegal

/tlm Encls.

(#2389024)

## CERTIFICATE OF DISSOLUTION FOR

4 MORE CAPITAL PARTNERS LP		
(Name of Florida Limited Partnership o	r Limited Liabili	ty Limited Partnership)
	ed partnership	o, whose certificate was filed with the, assigned Florida
FIRST: Reason for dissolution: (S	State why part	nership is submitting dissolution)
Mutual agreement of the partners.		
, , ,		
SECOND: A Notice of Disso (Check box if a		ned.
Department of State.)	e than 90 days af es not meet the ap	fier the date this document is filed by the Florida oplicable statutory filing requirements, this date will then the State's records.
Signatures of each general partner or the p	person appointed	nursuant to s. 620 1803(3) or (4) F.S.:
41	тегзоп арроппеа	Glendon C. Smith
Fles Nove Fru 10a	<del></del>	
Filing Fee:	\$52.50	
Certified Copy (optional):	\$52.50	·5.
Certificate of Status (optional):	\$8.75	