

A21 0000000282

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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01/26/22--01017--001 **52.50

FILED
2022 JAN 26 PM 3:47
CLERK OF STATE
TALLAHASSEE, FL

M. GUCKER

JAN 28 2022

January 11, 2022

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Re: MHG Sarasota Hotel, LP

To Whom It May Concern:

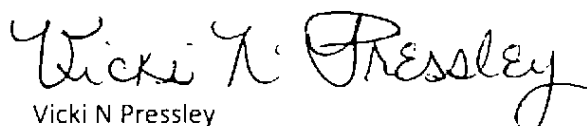
Enclosed is the cover letter, Certificate of Dissolution for MHG Sarasota Hotel, LP and the Notice of Dissolution for said entity. Also enclosed is our check in the amount of \$52.50 to cover the cost of this filing.

Finally enclosed is a copy of correspondence and an application for refund dated August 19, 2021, for which we never received a response and would appreciate you following up on as well.

We look forward to receiving the filed dissolution documents as well the refund requested in the attached paperwork.

If you have any questions or need anything further, please do not hesitate to contact me. My email address is vicki.pressley@mckibbon.com and my telephone number is 770/906-9287.

Sincerely,


Vicki N Pressley
Paralegal

Enclosures

McKIBBON
HOSPITALITY

COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: MHG Sarasota Hotel, 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:

James M. Coyle

(Contact Person)

McKibbin Hotel Group, Inc.

(Firm/Company)

402 Washington Street, SE, Suite 200

(Address)

Gainesville, GA 30501

(City, State and Zip Code)

For further information concerning this matter, please call:

James M. Coyle

at (770)

906-9284

(Name of Contact Person)

(Area Code)

(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**

MHG SARASOTA HOTEL, 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 June 16, 2021, assigned Florida document number A21000000282, hereby submits this Certificate of Dissolution.

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

The purpose of the limited partnership has been completed.

SECOND: ☒ A Notice of Dissolution is attached.
(Check box if attached.)

THIRD: Effective date, if other than the date of filing: December 31 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) or (4).

General Partner:
McKibbin Hotel Group, Inc.

By: James M. Coyle

James M. Coyle, Secretary

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

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2021 JUN 26 PM 3:47
TARY & STATE
OFFICE, FL

**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:

MHG Sarasota Hotel, LP

Description of information that must be included in a claim:

Name and address of claimant, services provided and full description of the claim.

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

402 Washington Street, SE, Suite 200

Gainesville, GA 30501

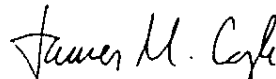
A claim against the above named limited partnership or limited liability limited partnership will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of the notice.

Signature of a general partner or a principal of the successor entity:

McKibben Hotel Group, Inc.

James M. Coyle, Secretary

Printed Name



Signature

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