

A22000000363

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(Requestor's Name)

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(City/State/Zip/Phone #)

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(Business Entity Name)

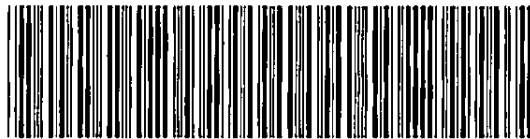
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S. PRATHER

## COVER LETTER

**TO:** Registration Section

Division of Corporations

**SUBJECT:** M MARTINEZ FAMILY LIMITED PARTNERSHIP, LLP  
(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:

MARILYN MARTINEZ

(Contact Person)

M MARTINEZ FAMILY LIMITED PARTNERSHIP, LLP

(Firm/Company)

7098 BONITA DRIVE

(Address)

MIAMI BEACH, FLORIDA 33141

(City, State and Zip Code)

For further information concerning this matter, please call:

MARILYN MARTINEZ

at ( 786 ) 227-0146

(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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 29, 2024

M MARTINEZ FAMILY LIMITED PARTNERSHIP, LLLP  
7098 BONITA DRIVE  
MIAMI BEACH, FL 33141

SUBJECT: M MARTINEZ FAMILY LIMITED PARTNERSHIP, LLLP  
Ref. Number: A22000000363

We have received your document for M MARTINEZ FAMILY LIMITED PARTNERSHIP, LLLP and your check(s) totaling \$61.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The filing is missing the Certificate of Dissolution. The Notice of Dissolution and Certificate of Dissolution has to be filed together

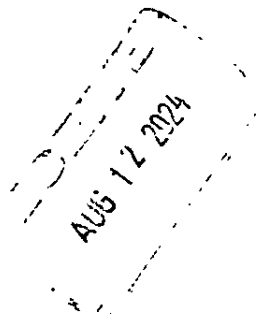
We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6939.

Stacy Prather  
Regulatory Specialist III

Letter Number: 024A00016598



## CORPORATE RESOLUTION AUTHORIZING DISSOLUTION

I, MARILYN MARTINEZ, as Managing Member of M MARTINEZ FAMILY LIMITED PARTNERSHIP, LLLP, a Florida Limited Liability Company, (hereinafter referred to as "COMPANY"), do hereby certify that at a special meeting of the Members of said COMPANY, duly held at its office on this 15th day of June, 2024, at which a quorum was present and acting throughout, the following resolutions were duly moved, seconded and unanimously adopted:

### RESOLVED:

That it is in the best interest of the COMPANY, to dissolve its Charter and cease operations. There are no assets and the Company has ceased all operations.

### RESOLVED:

That there is no provision contained in the Articles of Organization nor By-Laws of this COMPANY which require approval of this transaction by any other means other than by Corporate Resolution.

### RESOLVED:

That the COMPANY has no assets or liabilities on its books and that there are no open, pending or expired Contract liabilities, obligations or covenants to any third parties. Furthermore, the COMPANY does not have any demand accounts, checking accounts, Savings Accounts, Security Accounts, Certificates of Deposit or any financial account whatsoever.

### Resolved:

That MARILYN MARTINEZ, is authorized and directed on behalf of the COMPANY as a Member, Managing Member and Authorized Representative Agent of the COMPANY, to make, execute and deliver any and all documentation necessary to effectuate the aforesaid nomination.

I FURTHER CERTIFY, that the foregoing Resolutions remain in full force and effect, have not been rescinded or modified, and conform with the Charter and By-Laws of the COMPANY.

IN WITNESS WHEREOF, I have hereunto set my hand as Manager and Authorized Representative Agent and affixed its corporate seal, by order of the Board of Directors, this 15<sup>th</sup> day of June, 2024.

Attest:

M MARTINEZ FAMILY LIMITED PARTNERSHIP, LLLP,  
a Florida Limited Liability Company

By:   
MARILYN MARTINEZ, Managing Member  
and Authorized Representative Agent

**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:

M MARTINEZ FAMILY LIMITED PARTNERSHIP, LLLP

Description of information that must be included in a claim:

NAME, ADDRESS, TELEPHONE NUMBER AND OBJECT OF THE CLAIM

CLAIMS AGAINST THE LIMITED LIALIBILY LIMITED PARTNERSHIP WILL BE BARRED

UNLESS A PROCEEDING TO ENFORCE THE CLAIM IS COMMENCED WITHIN 4 YEARS AFTER

THE FILING OF THE NOTICE.

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

7098 BONITA DRIVE


MIAMI BEACH, FLORIDA 33141

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 notice.

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

MARILYN MARTINEZ

Printed Name

  
Signature

Filing Fee: \$52.50  
Certified Copy (optional): \$52.50

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