orida Department of State

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(((H23000177246 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : I20160000017 Phone : (855)498-5500 Fax Number : (800)432-3622

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

ËP/LLLP AMENDMENT/RESTATEMENT/CORRECTION QUANTUM PASCO POWER, LP

Certificate of Status	0
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MAY 1 5 2023

COVER LETTER

H23000177246

TO: Regi	stration Section
Division of	Corporations
SUBJECT:	Quantum Pasco Power, LP (Name of Florida Limited Partnership or Limited Liability Limited Partnership)
	d Certificate of Dissolution and fee(s) are submitted for filing. a all correspondence concerning this matter to:
	(Contact Person)
Bracewell LLI	P
	(Firm/Company)
711 Louisiana	St. Suite 2300
	(Address)
Houston, TX 7	77002
	(City, State and Zip Code)
For further i	nformation concerning this matter, please call:
Chase Edmund	(Name of Contact Person) at (713) 221-1449 (Daytime Telephone Number)
Enclosed is	a check for the following amount:
\$52.50 Filir	ng Fee S61.25 Filing Fee and Certificate of Status S113.75 Filing Fee Certified Copy 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

H23000177246

CERTIFICATE OF DISSOLUTION FOR

Quantum Pasco Power, LP (Name of Florida Limited Partnership or Limited Liability Limited Partnership)				
FIRST: Reason for dissolution: (S	State why part	nership is submitting dissolution)		
This is a voluntary dissolution. The entity	is no longer acti	ve.		
SECOND: A Notice of Disso		ned.		
(Check box if a	ttached.)		202	
Department of State.)	e than 90 days af s not meet the ap	fler the date this document is filed by the Florida plicable statutory filing requirements, this date we ment of State's records.	7023HAY 2 PM 2:3	77.7
			<u>:</u>	
Signatures of each general partner or the p	erson appointed	pursuant to s. 620.1803(3) or (4), F.S.: Quantum Pasco GP, LLC, its General Partne	:r	
	_	/s/ James Maiz		
	_	James Maiz, Authorized Person		
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75			