A9300000 8061

(Requestor's Name)
(Address)
· (Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
· · · · · · · · · · · · · · · · · · ·
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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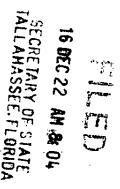
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FLORIDA DEPARTMENT OF STATE Division of Corporations

December 12, 2016

BELLESTAR MANAGEMENT SILVIA GUTTI 6001 BROKEN SOUND PKWY NW, STE. 400 BOCA RATON, FL 33487

SUBJECT: GALLERIA VENICE, LTD.

Ref. Number: A93000000061



We have received your document for GALLERIA VENICE, LTD. 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 notice of dissolution must contain: 1.) The name of the dissolved limited partnership; 2.) A statement that persons with unknown claims present them in accordance with the notice; 3.) A description of the information that must be included in a claim; 4.) A mailing address to which the claim may be sent; and 5.) A statement that a claim against the limited partnership will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of the notice.

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) 245-6051.

Karen A Saly Regulatory Specialist II

Letter Number: 316A00026321

COVER LETTER

Division of Co						
SUBJECT: Galleria Venice LTD						
(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:						
SILVIA GUTTI (Contact Person)						
BELLESTAR MANAGEMENT (Firm/Company)						
GOOI BROKEN SOUND PKWY NW STE 400 (Address)						
BOCARATON, FL 33487 (City, State and Zip Code)						
For further information concerning this matter, please call:						
SILVIA GU (Name of Contact	ot Person)	at (<u>561</u>) <u>9</u> (Area Code and Da	94-5954 ytime Telephone Number)			
Enclosed is a check for the following amount:						
S52.50 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 Corporati Clifton Building 2661 Executive Cente Tallahassee, FL 3230	ons er Circle	MAILING A Registration S Division of C P. O. Box 633 Tallahassee, I	Section orporations 27			

CERTIFICATE OF DISSOLUTION FOR

Galleria	Venice LTD		
(Name of Florida Limited Par		Liability Limited Partnersh	ip)
Pursuant to the provisions of section partnership or limited liability limite Florida Department of State on 1/document number A93000000061	d partnership, wl 19/1993	hose certificate was file	d with the d Florida
Dissolution.	, nercoy	Submits this Continuation	701
FIRST: Reason for dissolution: (St	ate why partners	ship is submitting dissol	ution)
All or substantially all of the Partnership	property has beer	n sold.	
			•
		· · · • • •	16 SEC
SECOND: A Notice of Dissol (Check box if attac			RETARY AHASSE
THIRD: Effective date, if other than the date of filing: 12/19/2016			
(Effective date cannot be prior to nor more Department of State.)	than 90 days after ti	he date this document is filed	d hand long
Signatures of each general partner or s. 620.1803/37 or (4), F.S.: Jean Bianchord, for General 1		pinted pursuant to	
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75		