P930000031S

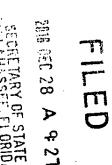
(Re	equestor's Name)			
(Ac	ddress)	<u></u>		
(Ac	ddress)			
(Ci	ty/State/Zip/Phone #)		
PICK-UP	WAIT	MAIL		
(Bu	usiness Entity Name)		
(Document Number)				
Certified Copies	Certificates of	f Status		
Special Instructions to Filing Officer:				

Office Use Only



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TO: Registration Division of	Section Corporations				
SUBJECT:(Name of	JLY C	Group, Ltd ip or Limited Liabili	ty Limited	Partnership)	
The enclosed Certif	icate of Dissolution ar	nd fee(s) are subm	itted for	filing.	
Please return all con	respondence concerni	ng this matter to:			
JL Youderian			_		
	(Contact Person)				
	(Firm/Company)		-		
3500 Raeford Roa			_		
	(Address)				
Orlando, FL 32806	, 				
	(City, State and Zip Code)		_		
For further informa	tion concerning this m	atter, please call:			
JL Youderian		at (407) 351-67	30	
(Name of Contact Person)		(Area Code	(Area Code and Daytime Telephone Number)		
Enclosed is a check	for the following amo	ount:			
\$52.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	\$105.00 Filing and Certified Co	by C	\$113.75 Filing Fee, Certified Copy, and Certificate of Status	
STREET ADDRE	SS:	MAIL	ING AD	DRESS:	
Registration Section			Registration Section		
Division of Corpora	ations		Division of Corporations		
Clifton Building			P. O. Box 6327		
2661 Executive Cer		Tallah	assee, FL	32314	
Tallahassee, FL 32	.)UT				

CERTIFICATE OF DISSOLUTION FOR

	LY Group, Lte artnership or Limited	d Liability Limited Partnership)
Pursuant to the provisions of section partnership or limited liability limited. Florida Department of State ondocument numberA93000000375. Dissolution.	ed partnership, w	hose certificate was filed with the
FIRST: Reason for dissolution: (S	State why partner	ship is submitting dissolution)
The partnership business operations a	nd investments ha	ve been sold and all capital
returned to partners.		
Department of State.)	ched.) late of filing: than 90 days after t	December 22, 2016 he date this document is filed by the Florida
Signatures of each general partner of s. 620.1803(3) or (4), F.S.:	or the person appo	ointed pursuant to
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75	PRIS DEC 28 A CHANASSEELFL
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