

A94 000 000 411

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

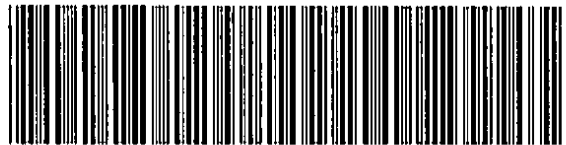
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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CORPORATIONS

*Dissolution
w/matrix*

APR 27 2020

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COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: Lathan Family Limited

(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:

Jason Boffey

(Contact Person)

(Firm/Company)

1881 Merlot Drive

(Address)

Sanford, FL 32771

(City, State and Zip Code)

For further information concerning this matter, please call:

Jason Boffey

at (

352

(Area Code)

281-9691

(Daytime Telephone Number)

(Name of Contact Person)

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

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DIVISION OF CORPORATIONS
20 APR 19 24 3:59

**CERTIFICATE OF DISSOLUTION
FOR**

Lathan Family Limited

(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 March 25, 1994, assigned Florida document number A94000000411, hereby submits this Certificate of Dissolution.

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

Completion of all partnership business and interests

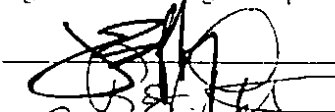
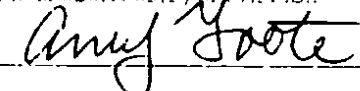
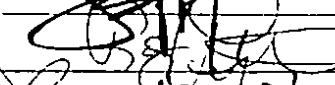
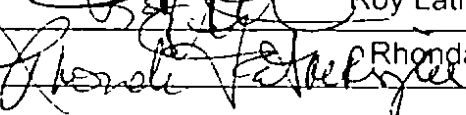
SECOND: ☒ A Notice of Dissolution is attached.
(Check box if attached.)

THIRD: Effective date, if other than the date of filing: Date of Filing
(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.

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Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.:

	Jason Boffey, GP		Amy Foote, GP
	Roy Lathan, GP		
	Rhonda Featherngill, GP		

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

**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:
Lathan Family Limited

Description of information that must be included in a claim:

All written instruction to begin or incur costs on behalf of the Partnership: Date of instructions

Date any work or costs incurred: Name of general partner authorizing work or incurring of costs

Last date of any work or costs incurred

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

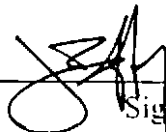
1881 Merlot Drive, Sanford, FL 32771

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:

Jason Boffey, GP

Printed Name



Signature

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

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS