

A94,000,000,949

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

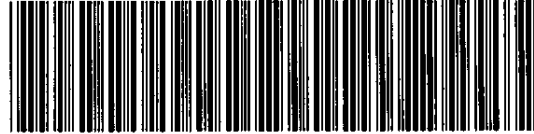
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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FILED
17 JAN 11 AM 8:53
CLERK OF COURT
TALLAHASSEE, FLORIDA

RECEIVED
17 JAN 11 AM 11:49
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TALLAHASSEE, FLORIDA

JAN 12 2017

Y SULKER

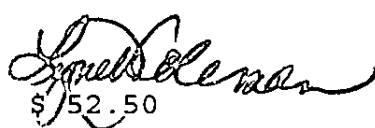
CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 461147 162285A

AUTHORIZATION :

COST LIMIT : \$52.50



ORDER DATE : January 10, 2017

ORDER TIME : 8:58 AM

ORDER NO. : 461147-045

CUSTOMER NO: 162285A

DOMESTIC FILINGS

NAME: WENDBEACH ASSOCIATES LIMITED
PARTNERSHIP

RECEIVED
SECRETARY OF STATE
17 JAN 11 AM 11:03

XX ARTICLES OF DISSOLUTION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender - EXT#

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: WENDBEACH ASSOCIATES LIMITED PARTNERSHIP
(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:

NATALIE GURIN, ESQ.

(Contact Person)

EISEMAN LEVINE LEHRHAUPT & KAKOYIANNIS PC

(Firm/Company)

805 THIRD AVENUE, 10TH FL

(Address)

NEW YORK, NY 10022

(City, State and Zip Code)

For further information concerning this matter, please call:

NATALIE GURIN

(Name of Contact Person)

at (212) 752-1000

(Area Code and 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

**CERTIFICATE OF DISSOLUTION
FOR**

WENDBEACH ASSOCIATES LIMITED PARTNERSHIP

(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 07/14/1994, assigned Florida document number A94000000949, hereby submits this Certificate of Dissolution.

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

By the unanimous vote of the shareholders of the general partner of the company to dissolve.

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

THIRD: Effective date, if other than the 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.)

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

Wendbeach Corp., general partner

By: [Signature]

Lewis E. Topper, Secretary

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

RECEIVED
FLORIDA
DEPARTMENT OF STATE

17 JAN 11 AM 8:57

**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:

WENDBEACH ASSOCIATES LIMITED PARTNERSHIP B.

Description of information that must be included in a claim:

Name and address of the claimant and detailed description of the claim.

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

c/o Fast Food Systems, Inc., 42-40 Bell Boulevard, Suite 200, Bayside, NY 11361

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

WENDBEACH CORP., By Lewis E. Topper, Secy

Printed Name


Signature

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

FILED
17 JAN 11 AM 8:57
CLERK OF THE COURT
FLORIDA