A95000002014

(Requestor's Name)		
(Address)		
(Address)		
(City.	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
Certified Copies	Certificates	s of Status
Special Instructions to Filing Officer:		





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2014 NR 12 AM 9-30

FLORIDA RESEARCH & FILING SERVICES, INC. 1211 CIRCLE DRIVE TALLAHASSEE, FL 32301 PHONE (850)364-8000

OFFICE USE ONLY

WALK-IN

ENTITY NAME:

SYNAMAK HOLDINGS, LTD.

CK# 6388 FOR \$105.00

PLEASE FILE THE ATTACHED DISSOLUTION & RETURN THE FOLLOWING:

XXX CERTIFIED COPY

__ STAMPED COPY

__ CERTIFICATE OF STATUS

Examiner's Initials

CERTIFICATE OF DISSOLUTION

<u>of</u>

SYNAMAK HOLDINGS, LTD.

Pursuant to the provisions of Florida Statutes §620.1203, this Florida Limited Partnership (the "Partnership") submits the following Certificate of Dissolution:

FIRST: The name of the Partnership is SYNAMAK HOLDINGS, LTD.

SECOND: The date of filing of the Partnership's certificate was filed with the Florida

Department of State on December 22, 1995.

THIRD: The Document Number of the limited partnership is A95000002014.

FOURTH: The Dissolution is being filed because the Partnership has distributed all

of its assets to its partners and its partners have determined that the

Partnership will do no further business.

FIFTH: A Notice of Dissolution is being submitted and is attached.

SIXTH: The effective date of the Dissolution of the Partnership is upon filing of

this Certificate of Dissolution and Notice of Dissolution with the Florida

Department of State.

Dated this 16 day of January , 2014.

Manual 1

By:

MARIANN KLOTZ

General Partner

By:

General Partner

NOTICE OF DISSOLUTION FOR FLORIDA LIMITED PARTNERSHIP

This notice is submitted by the dissolved limited partnership named below for resolution of payment of unknown claims against this limited partnership as provided in Section 620.1807, F.S.

This "Notice of Dissolution" is optional and is not required when filing a certificate of dissolution.

FIRST:

The name of the dissolved limited partnership is:

SYNAMAK HOLDINGS, LTD.

SECOND:

The information to be provided in the claim shall include the date of the claim, the amount of the claim, and the name of the creditor.

THIRD:

The mailing address where claims can be sent is as follows:

Packman Neuwahi & Rosenberg Attn: Ralph Nardi, Esq. 1500 San Remo Avenue, Suite 125 Coral Gables, FL 33146

FOURTH:

A claim against the above named limited partnership will be barred unless a proceeding to enforce the claim is commenced within four

(4) years after the filing of this notice.

SYNAMAK HOLDINGS, LTD.

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By:

MARIANN KLOTZ

General Partner

By:

SYNTHIA KARLIN

General Partner