## A97000000977

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
(Sity/State/Ziph Hone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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SECRETARY OF STATE
TALL ARASSELL FROM FOR

APPROVED AND FILED

## **COVER LETTER**

TO: Registration Section

Tallahassee, FL 32301

Division of Corporations	
RICHLAND CALABASA	S, LTD.
SUBJECT:	aited Partnership or Limited Liability Limited Partnership)
The enclosed Certificate of Dissolu Please return all correspondence co John Troutman	tion and fee(s) are submitted for filing. neerning this matter to:
	(Contact Person)
Richland Ventures, Inc.	
	(Firm Company)
3161 Michelson, Ste. 425	
	(Address)
Irvine, CA 92612	
(City	, State and Zip Code)
For further information concerning	this matter, please call:
John Troutman	949 383-4131 at ( )
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following	ng amount:
\$52.50 Filing Fee S61.25 Filing and Certifica Status	
STREET ADDRESS:	MAILING ADDRESS:
Registration Section	Registration Section
Division of Corporations Clifton Building	Division of Corporations P. O. Box 6327
2661 Executive Center Circle	Tallahassee, FL 32314

## CERTIFICATE OF DISSOLUTION **FOR**

RICHLAND CALABASAS, LTD.		
(Name of Florida Limited Partnership or	Limited Liability Limited	Partnership)
Pursuant to the provisions of section partnership or limited liability limite Florida Department of State on May document number A97000000977	ed partnership, whose 2, 1997	atutes, this Florida limited certificate was filed with the, assigned Florida mits this Certificate of
FIRST: Reason for dissolution: (S	tate why partnership i	s submitting dissolution)
Consent of all partners to termination.		
SECOND: A Notice of Dissol (Check box if a		
<b>THIRD:</b> Effective date, if other than the (Effective date cannot be prior to nor more Department of State.)  Note: If the date inserted in this block does not be listed as the document's effective date.	than 90 days after the dat s not meet the applicable st	atutory filing requirements, this date will
Signatures of each general partner or the po	erson appointed pursuant to	o s. 620.1803(3) or (4), F.S.:
Richland Venture	5. Inc	
By: W-8~		
John C. Troutma	 n	
Vice President	· <del>-</del>	
Filing Fee:	\$52.50	~·. <b>~</b>
Certified Copy (optional):	\$52.50	元 (20) (21)
Certificate of Status (optional):	\$8.75	<u> </u>

## 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: RICHLAND CALABASAS, LTD.
Description of information that must be included in a claim:
Full description of all basis for any such claim.
Mailing address where claims can be sent: (Claims cannot be sent to the Florida Department of State.)
Richland Ventures, Inc.
3161 Michelson, Ste. 425
Irvine, CA 92612
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:
Richland Ventures, Inc.
Printed Name Signature John C. Troutman Vice President

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