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K. SALY

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE: 099416 8113042 AUTHORIZATION : COST LIMIT ORDER DATE: December 12, 2019 ORDER TIME : 2:04 PM ORDER NO. : 099416-005 CUSTOMER NO: 8113042 DOMESTIC FILINGS NAME: VESTCOR FUND XI, LTD. XX _ ARTICLES OF DISSOLUTION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: CERTIFIED COPY _ PLAIN STAMPED COPY _ CERTIFICATE OF GOOD STANDING

EXAMINER'S INITIALS:

CONTACT PERSON: Kadesha Roberson - EXT#

COVER LETTER

10: Registration Section	
Division of Corporations	
VESTCOR FUND XI, LTD.	
(Name of Florida Limite	ed Partnership or Limited Liability Limited Partnership)
The enclosed Certificate of Dissolution Please return all correspondence conditions James	
((Contact Person)
Lincoln Avenue Capital	
(1	irm/Company)
680 Fifth Avenue, 17th Floor	
	(Address)
New York, New York 10019	
(City, S	tate and Zip Code)
For further information concerning th	is matter, please call:
Hanna Jamar	646 5855527 at ()
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following	amount:
\$52.50 Filing Fee Status	
STREET ADDRESS: Registration Section	MAILING ADDRESS: Registration Section

Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

CERTIFICATE OF DISSOLUTION **FOR**

FILED EDIS DEC 12 AM 10: 19

VESTCOR FUND XI, LTD.

Limited Liability Limited Partnership)
620.1203, Florida Statutes, this Florida limited d partnership, whose certificate was filed with the mber 19, 1997, assigned Florida, hereby submits this Certificate of
tate why partnership is submitting dissolution)
than 90 days after the date this document is filed by the Florida not meet the applicable statutory filing requirements, this date will
e on the Department of State's records.
rson appointed pursuant to s. 620.1803(3) or (4), F.S.:
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\$52.50
\$52.50 \$8.75