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(((H23000121496 3)))



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To:

Division of Corporations

Fax Number

; (850)617-6383

From:

Account Name : THERREL BAISDEN, LLP

Account Number : I20140000065

Phone

: (305)371-5758

Fax Number

: (305)371-3178

#### DISS/TERM/CANCEL/REV OF LP/LLP MCCOMAS GROUP, LTD.

Certificate of Status	0
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MAR 3 1 2023

K. Brumbley

Tallahassee, FL 32301

### H230001214963

#### **COVER LETTER**

TO: Regi	stration Section		
Division of	Corporations		
SUBJECT:	McComas Group, Ltd.		
		runership or Limited Liability Limited	Partnership)
	d Certificate of Dissolution and all correspondence concernoaniels		or filing.
	(Солы	act Person)	
Therrel Baisde	en, LLP		
	(Fіппл	Сотралу)	
1 SE 3rd Aver	nue, Suite 2950		
	(Add	ircas)	<del> </del>
Miami, FL 33	131		
	(City, State	and Zip Code)	
For further i	information concerning this	matter, please call:	
Nicholas M. E	Daniels	305 371-5 at ( )	758
	(Name of Contact Person)	(Area Code) (Dayt	ime Telephone Number)
Enclosed is	a check for the following an	nount:	
S52.50 Fili	ng Fee \$61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee and Certified Copy	S113.75 Filing Fee, Certified Copy, and Certificate of Status
STREET A	.DDRESS:	MAILING ADDRESS:	
•	stration Section Registration Section		
	rision of Corporations Division of Corporations Thon Building P. O. Box 6327		-
	661 Executive Center Circle Tallahassee, FL 32314		

H230001214963

## CERTIFICATE OF DISSOLUTION FOR

McComes Group, Ltd.	
(Name of Florida Limited Partnership or Lim	ned Liability Limited Parmership)
partnership or ilmited liability limited pr Florida Department of State on 12/12/199	0.1203, Florida Statutes, this Florida limited artnership, whose certificate was filed with the 7, assigned Florida, hereby submits this Certificate of
FIRST: Reason for dissolution: (State	why partnership is submitting dissolution)
Parmership is liquidating its assets and distribu	
SECOND: A Notice of Dissolution (Check box if attack	•
Devariment of State.)	n 90 days ofter the date this document is filed by the Florida meet the applicable statutory filing requirements, this date will
Signatures of each general partner or the person,	eppointed pursuant to s. 620 1803(3) or (4), F.S.:
Sole 6P	
b	52.50
certifica coft (element).	52.50 3.75

2023 HAR 31 PH 12: 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:  McComas Group, Ltd.				
Description of information that must be	included in a claim:			
Mailing address where claims can be se	nt: (Claims cannot be sent to the Florida Department of State.)			
Therrel Baisden, LLP - 1 SE 3rd Avenue, Suite	2950, Miami, FL 33131			
A claim against the above named limite will be barred unless a proceeding to en 4 years after the filing of the notice.	d partnership or limited liability limited partnership force the claim is commenced within			
Signature of a general partner or a princ	ipal of the successor entity:			
Nicholas M. Daniels	Typok media			
Printed Name	Signature			

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