498000002295

(Re	equestor's Name)	·····			
(Address)					
(Address)					
(Ci	ty/State/Zip/Phone	: #)			
PICK-UP	WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	of Status			
Special Instructions to Filing Officer:					
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Office Use Only



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11/20/15--01013--018 **306.25

SECRETANT OF STATE
TALLAHASSEE, FLORIDA

N. Culligan DEC - 7 2015

COVER LETTER

TO: Registration Section Division of Corporations					
SUBJECT: 1021 Lycolw Load, UD (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:					
Jonathan Fryd (Contact Person) Fryd properties (Firm/Company)					
tryd properties					
523 Michigan Ave					
Mami Heny (City, State and Zip Code)					
For further information concerning this matter, please call:					
Kristina Rueda-Peruz at (305) 673 Z948 (Name of Contact Person) (Area Code and Daytime Telephone Number)					
(Name of Contact Person) (Area Code and Daytime Telephone Number)					
Enclosed is a check for the following amount:					
\$52.50 Filing Fee and Certificate of Status \$105.00 Filing Fee Certified Copy, and Certificate of 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					
Tallahassee FL 32301					



FLORIDA DEPARTMENT OF STATE Division of Corporations

November 23, 2015

JONATHAN FRYD **523 MICHIGAN AVENUE** MIAMI BEACH, FL 33139

SUBJECT: 1021 LINCOLN ROAD, LTD.

Ref. Number: A98000002295

We have received your document for 1021 LINCOLN ROAD, LTD. and your check(s) totaling \$306.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date must be specific and cannot be prior to the date of filing.

The document was received on 11/20/15.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Neysa Culligan Regulatory Specialist II

Letter Number: 115A00024636

FILED

CERTIFICATE OF DISSOLUTION FOR

2015 DEC -7 PN 4: 01

SECRETARY OF STATE TALLAHASSEE, FLORIDA

1021	LINCOLN	Road.	LTD.	TALLAHASSEE, FLOR
(Name of Flo	orida Limited Partn	ership or Limite	ed Liability Limit	ed Partnership)
Pursuant to the provisi partnership or limited Florida Department of document number 1990 Dissolution.	liability limited State on 09	partnership, v	whose certifica	nte was filed with the, assigned Florida
FIRST: Reason for d	issolution: (Sta	te why partne	rship is submi	tting dissolution)
No low	ger any	active	business	
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		· · · · · · · · · · · · · · · · · · ·		
	otice of Dissoluck box if attach		ed.	,
THIRD: Effective date, if	other than the date	of filing:		· .
(Effective date cannot be p Department of State.)	rior to nor more th	an 90 days after	r the date this doc	cument is filed by the Florida
Signatures of each ger s. 620.1803(3) or (4),		he person ap	pointed pursua	ant to
Filing Fee: Certified Copy (optic	onal):	\$52.50 \$52.50		