

A980000002438

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

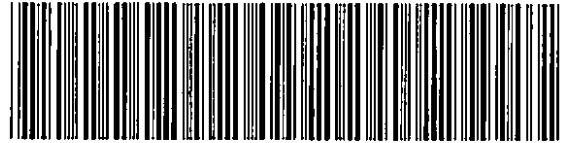
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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S. PRATHER

COVER LETTER

TO: Registration Section

Division of Corporations

SUBJECT: Lakeview Terrace, Ltd.
Certificate of Dissolution and Fees

The enclosed Certificate of Dissolution and fees are submitted for filing.
Please return all correspondence concerning this matter to:
Margaretha Bural

(Name)

(Address)

58 Reid Street

(Address)

Larpon Springs, FL 32982

(City, State, and Zip)

For further information concerning this matter, please call:

Margaretha Bural

727-492-1091

(City)

(Name of Contact Person)

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$52.50 Filing Fee

☒ \$61.25 Filing Fee
and Certificate of
Status

☐ \$105.00 Filing Fee
and Certified Copy

☐ \$113.75 Filing Fee,
Certified Copy, and
Certificate of Status

STREET ADDRESS:

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

MAILING ADDRESS:

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

**CERTIFICATE OF DISSOLUTION
FOR**

Linkview Terrace, Ltd.

(Name of Florida Limited Partnership or Florida Limited Liability Partnership)

Pursuant to the provisions of section 620.1203, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose certificate was filed with the Florida Department of State on 10/22/1998, assigned Florida document number A9800002438, hereby submits this Certificate of Dissolution.

FIRST: Reason for dissolution: (State why partnership is submitting dissolution)

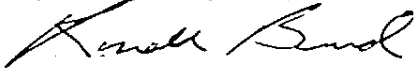
Property has been sold and assets have been distributed.

SECOND: ☐ A Notice of Dissolution is attached
(Check box if attached)

THIRD: Effective date, if other than the date of filing June 11, 2024
(Effective date cannot be prior to nor more than 90 days after the date the document is filed by the Florida Department of State.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Signatures of each general partner or the person appointed pursuant to s. 620.180(3) or (4), F.S.





Filing Fee:	\$52.50
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75

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