

**LOS 000018955**

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

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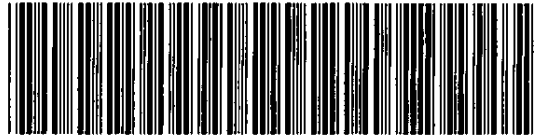
Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

789 ~~4089~~ 671

Office Use Only

LOS-18955



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05/08/08--01026--021 ++25.00

FILED

08 MAY 23 PM 3:37

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W. Thomas MAY 23 2008

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Amigo Partners LLC  
(Name of Limited Liability Company)

The enclosed Articles of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Philip R. Bartholomew Jr.

(Name of Person)

Amigo Partners LLC

(Firm/Company)

1024 SE 9 ST.

(Address)

Ft Lauderdale, FL 33311

(City/State and Zip Code)

For further information concerning this matter, please call:

Philip Bartholomew Jr.

(Name of Person)

at

954 303 2404

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 9, 2008

PHILIP R BARTHOLOMEW JR  
1024 SE 9 ST.  
FT. LAUDERDALE, FL 33316

SUBJECT: AMIGO PARTNERS LLC  
Ref. Number: L05000018955

We have received your document for AMIGO PARTNERS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Number three of the document must contain the date the decision to dissolve was approved or became effective. This date must be prior to the date this document was submitted for filing.

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) 245-6097.

Marsha Thomas  
Regulatory Specialist II

Letter Number: 208A00029819

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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**ARTICLES OF DISSOLUTION  
FOR  
A LIMITED LIABILITY COMPANY**

1. The name of a limited liability company is

Amigo Partners LLC

2. The Articles of Organization were filed on 2/24/05 and assigned document number

L05000018955

3. The date the dissolution was approved: 6/01/07

4. A description of occurrence that resulted in the limited liability company's dissolution pursuant to section 608.441, Florida Statutes, (copy 608.441 on back cover letter).

ceased doing business

5. CHECK ONE:

☒ All debts, obligations and liabilities of the limited liability company have been paid or discharged.

-OR-

☐ Adequate provision has been made for the debts, obligations and liabilities pursuant to s. 608.441.

6. All remaining property and assets have been distributed among its members in accordance with their respective rights and interests.

7. CHECK ONE:

☒ There are no suits pending against the company in any court.

-OR-

☐ Adequate provision has been made for the satisfaction of any judgment, order or decree which may be entered against it in any pending suit.

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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Signatures of the members having the same percentage of membership interests necessary to approve the dissolution:

Signature

Philip R Bartholomew Jr

Printed Name

Philip R Bartholomew Jr