

ADD00000001366

(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:

1010-16905

Office Use Only



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03/15/10--01056--011 **52.50

FILED

10 MAY 10 AM 8:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

MAY 11 2010

EXAMINER



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 22, 2010

LESLIE C. FELDMAN
277 BROADWAY, SUITE 601
NEW YORK, NY 10007

SUBJECT: THE FELDMAN PARTNERSHIP #2, LTD.
Ref. Number: A00000001266

FILED
10 MAY 10 AM 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

We have received your document for THE FELDMAN PARTNERSHIP #2, LTD. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

PLEASE COMPLETE THE DISSOLUTION FORM FOR THE FELDMAN PARTNERSHIP #2, LTD. IF THIS IS THE COMPANY BEING DISSOLVED

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) 245-6984.

Deborah Bruce
Regulatory Specialist II

Letter Number: 810A00010019



FLORIDA DEPARTMENT OF STATE
Division of Corporations

March 16, 2010

LESLIE C. FELDMAN
277 BROADWAY, SUITE 601
NEW YORK, NY 10007

SUBJECT: THE FELDMAN PARTNERSHIP #2, LTD.
Ref. Number: A00000001266

We have received your document for THE FELDMAN PARTNERSHIP #2, LTD. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6984.

Deborah Bruce
Regulatory Specialist II

Letter Number: 110A00006533

FILED
10 MAY 10 AM 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LESLIE C. FELDMAN, P.C.
277 BROADWAY, SUITE 601
NEW YORK, NY 10007
(212) 233-5688
FAX (212) 385-4960
Email: chambersrealty@yahoo.com

April 12, 2010

Division of Corporations
P.O. Box 6198
Tallahassee, FL 32314

Re: The Feldman Partnership #2, Ltd.
EIN # 65-1095037
Document Number: A00000001266
Ref. Number: W10000016905

To Whom It May Concern:

We are in receipt of your letter dated April 6, 2010. We do not understand why your records show no entity by this name.

Enclosed please find the following copies:

- 1. A copy of our 2009 Annual Report Payment Voucher, along with a copy of the check for same;**
- 2. A copy of the Annual Report Notice reminder card that we annually received from the Florida Department of State.**

All copies are being submitted as proof of The Feldman Partnership #2, Ltd.'s existence.

Also enclosed is the resubmission of the Notice of Dissolution with the description of the information that must be included in a claim.

If you have any questions, please contact our office.

Very truly yours,

LESLIE C. FELDMAN, P.C.
By: Leslie C. Feldman

Enclosures (3)
cc: File

FILED
10 MAY 10 AM 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 6, 2010

LESLIE C. FELDMAN
277 BROADWAY, SUITE 601
NEW YORK, NY 10007

SUBJECT: THE MILTON PARTNERSHIP #2, LTD.
Ref. Number: W10000016905

*/Feldman Partnership
#2*

We have received your document for THE MILTON PARTNERSHIP #2, LTD. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Our records show no entity by this name.

The document must include a description of the information that must be included in a claim.

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) 245-6984.

Deborah Bruce
Regulatory Specialist II

Letter Number: 910A00008457

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10 MAY 10 AM 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: THE ~~MILTON~~ PARTNERHIP #2, I.T.D.

(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:

Leslie C. Feldman

(Contact Person)

(Firm/Company)

277 Broadway, Suite 601

(Address)

New York, NY 10007

(City, State and Zip Code)

For further information concerning this matter, please call:

Leslie C. Feldman

(Name of Contact Person)

at (212) 233-5688

(Area Code and 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

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10 MAY 10 AM 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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**CERTIFICATE OF DISSOLUTION
FOR**

THE FELDMAN PARTNERSHIP #2 LTD

(Name of Florida Limited Partnership or Limited Liability Limited 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 AUGUST 14, 2000, assigned Florida document number A00000001266, hereby submits this Certificate of Dissolution.

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

Some of the principals have died and the company
is no longer in assistance.

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

THIRD: Effective date, if other than the date of filing: _____

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.:

Leslie C. Feldman

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

10 MAY 10 AM 8:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

**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:

THE MILTON PARTNESHIP #2, LTD.

Description of information that must be included in a claim:

Amount of Claim

Services of materials embraced by claim.

Persons who acted on behalf of partnership and
claimant.

Mailing address where claims can be sent: (Claims cannot be sent to the Florida Department of State.)

277 Broadway

Suite 601

New York, NY 10007

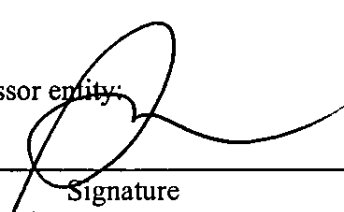
FILED
10 MAY 10 AM 8:57
CLERK OF STATE
TALLAHASSEE, FLORIDA

A claim against the above named limited partnership or limited liability limited partnership will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of the notice.

Signature of a general partner or a principal of the successor entity:

Leslie C. Feldman

Printed Name


Signature

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