

#A040000000066

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

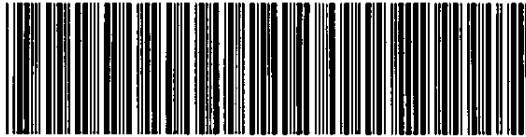
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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FILED  
2014 MAY -8 PM 4:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
EXAMINER  
MAY 20 2014

LAW OFFICES  
**TESCHER & SPALLINA, P.A.**

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BOCA RATON, FLORIDA 33432

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DIANE DUSTIN  
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May 6, 2014

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

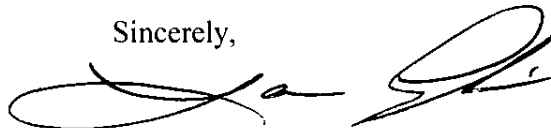
**RE: ARROSE INVESTMENTS, LTD.**  
**Document No. A04000000066**

Dear Sir/Madam:

Enclosed please find a Certificate of Amendment, Certificate of Dissolution and Notice of Dissolution of Florida Limited Partnership for the above-referenced company.

A two (2) checks in the total sum of \$113.75 payable to the Florida Department of State has been enclosed for payment.

Sincerely,



LAUREN A. GALVANI

LAG  
Encl.

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ARROSE INVESTMENTS, LTD  
(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:

Donald R. Tescher, Esq.  
(Contact Person)

Tescher & Spallina, P.A.  
(Firm/Company)

925 South Federal Highway, Suite 500  
(Address)

Boca Raton, Florida 33432  
(City, State and Zip Code)

For further information concerning this matter, please call:

Donald R. Tescher, Esq. at ( 561 ) 997-7008  
(Name of Contact Person) (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

**CERTIFICATE OF DISSOLUTION  
FOR**

**FILED**  
2014 MAY -8 PM 4:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARROSE INVESTMENTS, 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 January 12, 2004, assigned Florida document number A04000000066, hereby submits this Certificate of Dissolution.

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

There are no remaining general partners and the remaining limited partners will not consent

to continue the activities of the limited partnership and will not consent to appointing a new general

partner as it is their desire to dissolve the partnership.

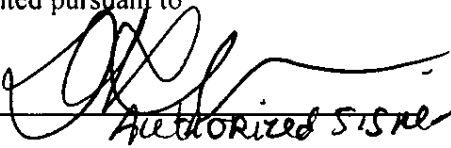
**SECOND:**  A Notice of Dissolution is attached.  
(Check box if attached.)

**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.:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

  
Authorized Signer  
\_\_\_\_\_  
\_\_\_\_\_

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

**NOTICE OF DISSOLUTION  
FOR  
FLORIDA LIMITED PARTNERSHIP  
OR LIMITED LIABILITY LIMITED PARTNERSHIP**

**FILED**  
2014 MAY -8 PM 4:47  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:

Arrose Investments, Ltd.

Description of information that must be included in a claim:

1. The name, address and telephone number of the claimant.

2. A description of the claim, including the date the debt or claim arose, the nature of the debt or claim, and the parties to the debt or claim.

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

c/o Tescher & Spallina, P.A.

925 South Federal Highway

Suite 500

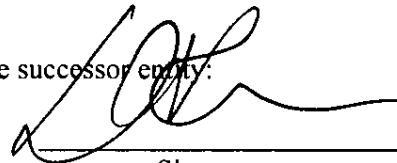
Boca Raton, Florida 33432

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:

Donald R. Tescher

Printed Name



Signature

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