A0700000450

(Requestor's Mar	ne)
(Address)	
(Address)	
(City/State/Zip/Ph	nane #)
PICK-UP WAIT	MAIL MAIL
(Business Entity	Name)
(Document Numb	per)
Certified Copies Certification	ates of Status
Special Instructions to Filing Officer:	
	:

Office Use Only



600340442186

2015-1 33 1:45

FILED
2020 FEB -7 AH IO:

20 FEB - 7 AM 10: 20 ECRETALY OF STITE

Y SULKER FEB 1 0 2020 CORPORATION SERVICE COMPANY 1201 Havs Street

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

PHONE: 850-556-1500			
ACCOUNT NO. : 12000000195			
REFERENCE : 173630 7447138			
AUTHORIZATION :			
COST LIMIT : \$52.50			
ORDER DATE : February 7, 2020			
ORDER TIME : 12:39 PM			
ORDER NO. : 173630-005			
CUSTOMER NO: 7447138			
DOMESTIC FILINGS			
NAME: CHOWDER APARTMENTS LP			
XX ARTICLES OF DISSOLUTION			
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:			
CERTIFIED COPY XX _ PLAIN STAMPED COPY			
CERTIFICATE OF GOOD STANDING			
CONTACT PERSON: Kadesha Roberson - FXT#			

EXAMINER'S INITIALS:

CERTIFICATE OF DISSOLUTION FOR

Chowder Apartments LP		
(Name of Florida Limited Partnership of	or Limited Liability Limited Partnership)	
partnership or limited liability limi Florida Department of State on 03/1	on 620.1203, Florida Statutes, this Florited partnership, whose certificate was a 14/2007, assig, hereby submits this Certificate.	filed with the ened Florida
FIRST: Reason for dissolution: (State why partnership is submitting dis	ssolution)
No longer doing business.		·
	1	
		-
SECOND: A Notice of Disso (Check box if a		2020 FEB SECRE TALL AS
Department of State.)	e than 90 days after the date this document is a not meet the applicable statutory filing requi	filed by the Florida
Signatures of each general partner or the p	person appointed pursuant to s. 620.1803(3) or	(4), F.S.:
Filing Fee: Certified Copy (optional):	\$52.50 \$52.50	
Certificate of Status (optional):	\$8.75	