## A12468

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SYMPREBETY

## **COVER LETTER**

TO:	Registration Division of	Section Corporations		
SUBJI		letree Apartment of Florida Limited Partner	ts, Ltd. ship or Limited Liability Lir	nited Partnership)
The en	closed Stater	nent of Termination a	nd fee(s) are submitted t	for filing.
Please	return all cor	respondence concerni	ng this matter to:	
Tzipp	y Rothen	<del>~</del> ,		
		(Contact Person)		
Shadetree Apartments, Ltd.				
		(Firm/Company)		
590 V	V. Kenne	dy Blvd, 2nd Fl		
		(Address)		
Lakewood, NJ 08701				
	<del></del>	(City, State and Zip Code)		
For fur	ther informat	tion concerning this m	atter, please call:	
Tzippy Rothenberg		at (_732) 77	9-6990	
	(Name of	Contact Person)		aytime Telephone Number)
Enclose	ed is a check	for the following amo	ount:	
<b>₹</b> \$52.56	) 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
STREI	ET ADDRES	SS:	MAILING A	ADDRESS:
Registration Section		Registration Section		
Division of Corporations		Division of Corporations		
Clifton Building		P. O. Box 6327		
2661 Executive Center Circle		Tallahassee,	FL 32314	
i allaha	ssee, FL 32	301		

## STATEMENT OF TERMINATION FOR

(Name of Florida Limited P	Partnership or Limited Liability Limited Partnership)
	on 620.1203, Florida Statutes, this Florida limited ted partnership, whose certificate was filed with the 5/06/1982, hereby submits thi
The limited partnership or limited lits affairs and wishes to file a stater	liability limited partnership has completed winding ument of termination.
Signatures of each general partner of s. 620.1803(3) or (4), F.S.:  May Aferouse	or the person appointed pursuant to
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75

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