## A9900001850

(Re	equestor's Name)	
(Ac	ldress)	
· (Ac	idress)	
(Ci	ty/State/Zip/Phon	e#)
	☐ WAIT	MAIL
(Bu	ısiness Entity Naı	me)
(Do	ocument Number)	,
Certified Copies	Certificate	s of Status
Special Instructions to	Filing Officer:	
<sup>र्र</sup> ्ग <b>ि</b> अविभाषि		
ं क, माम <b>स्त्रीई</b> स्टब्स		
· fig. 1	i Office Use Or	nly
en	•	
4 - :	gaves re-	
Elm In Italian	•••	•



000062344470

12/23/05--01041--020 \*\*105.00

ZOOD JAN -3 P 4: 07
SECRETARY OF STATE

okay to had for soon of blow of wearing near the wearing week of the wear of t

### **COVER LETTER**

TO: Registration Section  Division of Corporations	
SUBJECT: DISSOLUTION OF EPOCH FLORIDA CAPITAL RALEIGH INVESTMENT PARTNERS, 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:	
GREG JACOBY	
(Contact Person)	
EPOCH PROPERTIES, INC	
(Firm/Company)	
359 CAROLINA AVENUE	
(Address)	
WINTER PARK, FL 32789	
(City, State and Zip Code)	
For further information concerning this matter, please call:	
GREG JACOBY at (407 )644-9055 \(\overline{\rm 2}\sum_{\overline{\sigma}}\) \(\overline{\rm 2}\sum_{\overline{\sigma}}\)	
(Name of Contact Person) (Area Code and Daytime Telephoric Number)	सारक्ष
Enclosed is a check for the following amount:  HET JAN  SET JAN  S	in the second
\$52.50 Filing Fee  \$61.25 Filing Fee and Certificate of Status  \$105.00 Filing Fee  \$113.75 Filing Fee, Certified Copy Certificate of Status	
STREET ADDRESS: MAILING ADDRESS:	
egistration Section Registration Section	
Division of Corporations Division of Corporations	
Clifton Building P. O. Box 6327  2661 Executive Center Circle Tallahassee, FL 32314	
Inni Hypeunya i anteri treta 1910hacea Hi 14/4/4	

#### CERTIFICATE OF DISSOLUTION FOR

## EPOCH FLORIDA CAPITAL RALEIGH INVESTMENT PARTNERS, LTD

(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

	n 620.1203, Florida Statutes, this Flored partnership, whose certificate was 09/1999, here	
FIRST: Reason for dissolution: (S	State why partnership is submitting di	ssolution)
Only asset has bee		
	<del></del>	
SECOND: A Notice of Dissol (Check box if attack)		
THIRD: Effective date, if other than the o	date of filing:	
(Effective date cannot be prior to nor more Department of State.)	e than 90 days after the date this document is	≥2
Signatures of each general partner of s. 620.1803(3) or (4), F.S.:	or the person appointed pursuant to	IN-3 HASSEE,
3/		P #: 07
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

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;

Description of information that must be included in a claim:

## EPOCH FLORIDA CAPITAL RALEIGH INVESTMENT PARTNERS, LTD

	<del></del>
Mailing address where claims can be sent: (Claims cannot be	sent to the Florida 3
Department of State.)	JAN RETO AHA
EPOCH PROPERTIES, INC	ASS
27 0077 7(0) 21(1)20, 11(0)	m K
359 CAROLINA AVENUE	ס פיי
	<u> </u>
WINTER PARK, FL 32789	

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:

**GREG JACOBY** 

Printed Name

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