Electronic Filing Cover Sheet

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(((H06000096113 3)))

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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name

: CODINA GROUP, INC.

Account Number : I20020000144 Phone

: (305)520-2344

Fax Number

: (305)520-2400

LPALLP AMENDMENT/RESTATEMENT/CORRECTION

CODINA SAMPLE, LTD.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$52.50

Electronic Filing Menu

Corporate Filing Menu

Help

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CERTIFICATE OF DISSOLUTION FOR

Codina Sample, 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 03/31/04, hereby submits this Certificate of Dissolution.	
FIRST: Reason for dissolution: (State why partnership is submitting dissolution)	
No longer transacting business.	
	~ .3
	2005
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SECOND: A Notice of Dissolution is attached.	
(Check box if attached.)	က္
THIRD: Effective date, if other than the date of filing:	32
(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.:	
Codina Sample Inc.	
By: Follen BPCott	
Kollen OP Cobb UP	<u>.</u>
Filing Fee: \$52.50	
Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	