

A010000000424

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

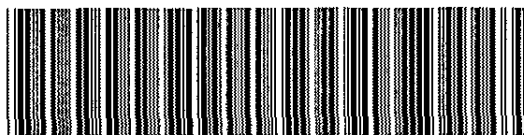
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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 SEP 28 PM 2:34

J. BRYAN 001 - 3 2006

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: ARNOLD, STINNETT AND KOBER, LLLP  
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

KENNETH C. KOBER  
(Name of Person)

\_\_\_\_\_  
(Firm/Company)

15205 HARBOUR ISLE DRIVE  
(Address)

FORT MYERS, FL 33908  
(City/State and Zip Code)

For further information concerning this matter, please call:

KENNETH C. KOBER at (339) 292-6944  
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☒ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**FILE CANCELLATION**

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

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**KEN KOBER, REALTOR**

15205 Harbour Isle Drive

Fort Myers, FL 33908

239/292-6944 Fax 239/790-0926



9000 Sheridan St, Suite 90

Pembroke Pines, FL 33024

954-862-2255 \* Fax 954-862-2256

Email address: [kenkober@comcast.net](mailto:kenkober@comcast.net)

Florida Dept. of State  
Division of Corporations

9/23/06

06 SEP 28 PM 2:36  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

I have been trying to cancel the partnership of Arnold, Stinnette and Kober, LLLC, since May 4<sup>th</sup>, 2004. (See letter from you office dated May 16, 2004.)

It has taken me this long to obtain all the partners' signature. I do not know what the effective date is to be, I know that we have not conducted any business since 2004.

On the back of the cover letter is the explanation as to the "why" we could not conduct business and therefore, chose to dissolve the partnership.

Thank you,

A handwritten signature in black ink, appearing to read 'Ken Kober', written in a cursive style.



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood  
Secretary of State

May 18, 2004

KOBER  
15205 HARBOUR ISLE DR.  
FORT MYERS, FL 33908

SUBJECT: ARNOLD, STINNETT AND KOBER, L.L.L.P.  
Ref. Number: A01000000424

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DIVISION OF CORPORATIONS  
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We have received your document for ARNOLD, STINNETT AND KOBER, L.L.L.P. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is to cancel a general partnership. Please complete the enclosed form to cancel a Florida limited partnership.

The fee to file the limited partnership cancellation is \$52.50.

There is a balance due of \$27.50.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6025.

Trevor Brumbley  
Document Specialist

Letter Number: 504A00034807

**CERTIFICATE OF DISSOLUTION  
FOR**

ARNOLD, STANNETT AND KOBEK, LLC

(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 3/22/06, hereby submits this Certificate of Dissolution.

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

WRITTEN CONSENT OF ALL THE MEMBERS OF THE  
LIMITED LIABILITY LIMITED PARTNERSHIP 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.:

Kenneth C. Kobek  
Paul Stannett  
April Arnold

Kenneth C. Kobek  
Paul Stannett  
April Arnold

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

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DIVISION OF CORPORATIONS  
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