

✓
A01000000619

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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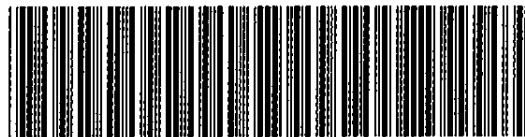
(Business Entity Name)

(Document Number)

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA

FF \$52.50

B. BOSTICK
JAN - 5 2011
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HOBBS PARTNERS LIMITED PARTNERSHIP
(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:

Charles L. Hoffman, Jr., Esq.
(Contact Person)

Shell, Fleming, Davis & Menge, P.A.
(Firm/Company)

226 Palafox Place, 9th Floor
(Address)

Pensacola, FL 32502
(City, State and Zip Code)

For further information concerning this matter, please call:

Charles L. Hoffman, Jr., Esq. at (850) 434-2411 ext. 103
(Name of Contact Person) (Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|--|---|--|---|
| <input checked="" type="checkbox"/> \$52.50 Filing Fee | <input type="checkbox"/> \$61.25 Filing Fee
and Certificate of
Status | <input type="checkbox"/> \$105.00 Filing Fee
and Certified Copy | <input type="checkbox"/> \$113.75 Filing Fee,
Certified Copy, and
Certificate of Status |
|--|---|--|---|

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

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

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TALLAHASSEE, FLORIDA
SECRETARY OF STATE

**CERTIFICATE OF DISSOLUTION
FOR**

HOBBS PARTNERS LIMITED PARTNERSHIP

(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 04/25/2001, assigned Florida document number A01000000619, hereby submits this Certificate of Dissolution.

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

By consent of the general partner and the limited partner.

SECOND: ☐ A Notice of Dissolution is attached.
(Check box if attached.)

THIRD: Effective date, if other than the date of filing: December 31, 2011

(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.:

Hobbs Management, Inc.

By: C.A. [Signature]

Its President

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

11 DEC 30 AM 11:29
SECRETARY OF STATE
TALLAHASSEE, FLORIDA