

AD1000000942

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

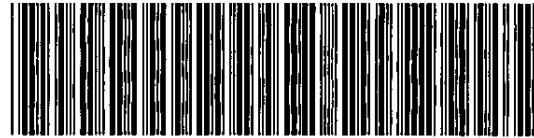
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



800290110308

09/16/16--01036--002 \*\*52.50

FILED  
2016 SEP 16 P 2:07  
TALLAHASSEE, FLORIDA

SEP 19 2015  
J. BRUCE

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** UST Hotel Joint Venture, 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:

Jimmie D. Williams

(Contact Person)

Belz Enterprises

(Firm/Company)

100 Peabody Place, Suite 1400

(Address)

Memphis, TN 38103

(City, State and Zip Code)

For further information concerning this matter, please call:

Jimmie D. Williams

(Name of Contact Person)

at ( 901 ) 767-4780

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$52.50 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

**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

2016 SEP 16 PM 2:07  
TALLAHASSEE, FL  
STATE OF FLORIDA

FILED

**CERTIFICATE OF DISSOLUTION  
FOR**

UST Hotel Joint Venture, 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 July 13, 2001, assigned Florida document number A01000000942, hereby submits this Certificate of Dissolution.

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

The partnership was liquidated and wound up its business affairs as of the close of business

on June 30, 2016.

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

**THIRD:** Effective date, if other than the date of filing: June 30, 2016

(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.:

X [Signature]

UST Hotel Corporation

by Lothar Estein, President

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

2016 SEP 16 PM 2:07  
RECEIVED  
TALLAHASSEE, FLORIDA  
STATE

FILED