

AD1 000000987

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

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

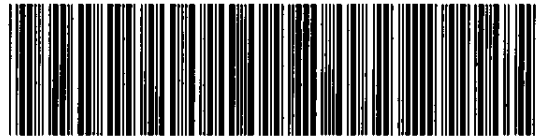
Special Instructions to Filing Officer:

Office Use Only

G. MCLEOD

JAN 20 2010

EXAMINER



700162691397

11/19/09--01017--021 \*\*52.50

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION  
10 JAN 19 PM 12:32

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** HAMMER CONSTRUCTION SERVICES, 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:

ETTA R. KOHL  
(Contact Person)

USA BUSINESS SERVICES, INC.  
(Firm/Company)

1422 SE 8TH AVENUE  
(Address)

CAPE CORAL, FL. 33990  
(City, State and Zip Code)

For further information concerning this matter, please call:

ETTA R. KOHL at ( 239 ) 214-0282  
(Name of Contact Person) (Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

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

**CERTIFICATE OF DISSOLUTION  
FOR**

HAMMER CONSTRUCTION SERVICES 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 23, 2001, assigned Florida document number A01000000987, hereby submits this Certificate of Dissolution.

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

NO LONGER IN BUSINESS

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

**THIRD:** Effective date, if other than the date of filing: November 1, 2009

(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.:

R. L. Hammer Inc

Billy Denman, Pres.

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION  
10 JAN 19 PM 12:32