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Registration Section

TO:

Division of Corporations SUBJECT: INSOFT/BALD ROCK LIMITED PARTNERSHIP (Name of Florida Limited Partnership or Limited Liability Limited Partnership) The enclosed Notice of Dissolution and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: MR. ASIF KHAN, CPA (Contact Person) KHAN, ARNDT & ASSOCIATES (Firm/Company) 701 94th AVE., N., SUITE 120 (Address) ST. PETERSBURG, FL 33702 (City, State and Zip Code) For further information concerning this matter, please call: at (727) 548-4400 x 101 (Area Code and Daytime Telephone Number) MR. ASIF KHAN, CPA (Name of Contact Person) Enclosed is a check for the following amount: ☐ \$113.75 Filing Fee, \$105.00 Filing Fee **✓**\$52.50 Filing Fee \$61.25 Filing Fee Certified Copy, and and Certificate of and Certified Copy Certificate of Status Status MAILING ADDRESS: STREET ADDRESS: Registration Section Registration Section Division of Corporations **Division of Corporations** Clifton Building P. O. Box 6327 2661 Executive Center Circle Tallahassee, FL 32314 Tallahassee, FL 32301

CERTIFICATE OF DISSOLUTION FOR

(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 AUGUST 17, 2001, assigned Florida document number A01000001097, hereby submits this Certificate of Dissolution.
FIRST: Reason for dissolution: (State why partnership is submitting dissolution)
CEASED DOING BUSINESS
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.)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date we not be listed as the document's effective date on the Department of State's records.
Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.:
Annly Schuff

\$52.50 \$52.50 \$8.75

Filing Fee: Certified Copy (optional): Certificate of Status (optional): 11

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