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2006 FEB 28 ₱ 2:57

	2000 1 20 1 2:51
(Requestor's Name)	SECRETARY OF STATE TALLAHASSEE, FUNDER
(Address)	600064556656
(City/State/Zip/Phone #)	
PICK-UP WAIT MA	AIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status _	
Special Instructions to Filing Officer:	02/28/0601018019 **27.50
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2005 FEB 28 P 2: 57 SECRETARY OF STATE TALLAHASSEE, FLORIDA

February 3, 2006

CLAUDIA A. FORT CAMPUS LODGE OF BRYAN, LTD. 1301 PLANTATION ISLAND DRIVE S., STE 304 ST. AUGUSTINE, FL 32080

SUBJECT: CAMPUS LODGE OF BRYAN, LTD.

Ref. Number: A01000001119

We have received your document for CAMPUS LODGE OF BRYAN, LTD. and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6094.

Agnes Lunt Document Specialist

Letter Number: 806A00008157

COVER LETTER

FILED

TO: Registratio	n Section Corporations		2001 FEB 28	P 2:57
	_ ^ .	ip or Limited Liability Lim	SECRETARY TALLAHASSEE hited Partnership)	OF STATE I, FLORIDA
The enclosed Certi	ficate of Dissolution as	nd fee(s) are submitted	for filing.	
Please return all co	orrespondence concerni	ng this matter to:		
Claus	(Contact Person)			
Camo	(Contact Person) Ous Develope (Firm/Company)	ment Group		
		Folgad Dri	ين <u>ح.</u>	
St. 4	(Address)	Suit 12 32080	304	
	←City, State and Zip Code)		
For further information	ation concerning this m	-	-01/ // 00	. 20/
(Name of Co	ntact Person)	at (<u>904)</u> & (Area Code and f	Daytime Telephone Number)	204
Enclosed is a check	k for the following amo	ount:		
\$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 ADDRE Registration Section Division of Corporal Clifton Building 2661 Executive Ce Tallahassee, FL 33	on rations rater Circle	Registration	Corporations 327	

CERTIFICATE OF DISSOLUTION FOR

(Name of Florida Limited Partnership or Limited Limited Partnership)
(Name of Florida Limited Partnership(or imited Liability Limited Partnership)
(Name of Florida Diffice Fathership & Diffice Blabins, Emiles Fathership)
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 08/17/200/, hereby submits this Certificate of Dissolution.
FIRST: Reason for dissolution: (State why partnership is submitting dissolution)
Partnership interests were
50/d.
SECOND: A Notice of Dissolution is attached. (Check box if attached.)
THIRD: Effective date, if other than the date of filing: 12/31/05
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florid Department of State.)
Signatures of each general partner or the person appointed pursuant to \$620.1803(3) on (4), F.S.:
Filing Fee: \$52.50