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SECRETARY OF STATE DIVISION OF STATE



COVER LETTER

TO: Registration Division of O	Section Corporations				
SUBJECT: <u>EAG</u> (Name of	SE TITLE OF Plorida Limited Partnersh	f EAST Tamp aip or Limited Liability Lim	ited Partnership)	_	
The enclosed Certifi	cate of Dissolution ar	nd fee(s) are submitted	for filing.		
Please return all corn	respondence concerni	ng this matter to:			
JARRE EAGLE	(Contact Person)	TS BSTRACT			1 <i>5</i>
	(Firm/Company)	1us	terto de la compositione de la comp		÷≨" .
	(Address) CTE, C City, State and Zip Code	33767	4 4. 5 5 <u>2</u> .	2006 AUG	UNIVIO OBS.
(City, State and Zip Code	·~= ·		UG 29	# 0° ~ 1
For further informat	ion concerning this m	atter, please call:		3	ੂਰ ੇ Ω 3,Ω
JARRELL A	201775 act Person)	at (72-7) 79.7 (Area Code and D	7002/ X /U () Paytime Telephone Number)		RATIONS RATIONS
Enclosed is a check	for the following amo	ount:			
\$52.50 Filing Fce	\$61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee and Certified Copy	S113.75 Filing Fee, Certified Copy, and Certificate of Status		
STREET ADDRES Registration Section Division of Corporat Clifton Building 2661 Executive Cent	ions	MAILING A Registration Division of GP. O. Box 63	Section Corporations 327		

Tallahassee, FL 32301

CERTIFICATE OF DISSOLUTION FOR

EAGLE TITLE of	- EAST	Tamps	CUP		
(Name of Florida Limited P	artnership or Lim	ited Liability L	imited Partnership)	~
Pursuant to the provisions of section partnership or limited liability limited Florida Department of State on Certificate of Dissolution.	ed partnership,	whose certif	ficate was filed	with the	- - · .
FIRST: Reason for dissolution: (S	, ,	•	1	·	
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SECOND: A Notice of Disso (Check box if attact THIRD: Effective date, if other than the	ched.)	ed.		··	
(Effective date cannot be prior to nor more Department of State.)	than 90 days afte	er the date this	document is filed l	by the Florida	3 9
Signatures of each general partner of s. 620.1803(3) or (4), F.S.:	or the person ap	pointed purs	uant to	W AUG	SECRE VISION
Truck Box Con Par	me_	\$		2	PARY SPARY SPARY
70)		Be .	F de la	3.3	ED Or SI Recal
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	-	7-4	x 140°		* * * * * * * * * * * * * * * * * * *
Filing Fee:	\$52.50				
Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$8.75				