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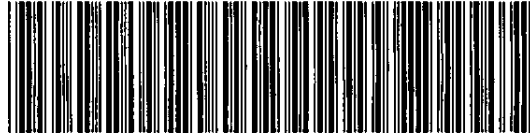
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SECRETARY OF STATE
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SEP 09 2015
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: VIRGIN ISLAND ASSOCIATES, LLLP
(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

DOCUMENT NUMBER: A 01000001164

The enclosed Statement of Dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

SANDEE ZAPPA
(Contact Person)

HEMBREE & ASSOCIATES, INC
(Firm/Company)

1335 SECOND ST
(Address)

SARASOTA, FL 34234
(City, State and Zip Code)

For further information concerning this matter, please call:

SANDEE ZAPPA at (941) 951-1774
(Name of Contact Person) (Area Code and Daytime Telephone Number)

☒ \$52.50 Filing Fee

☐ \$105.00 Filing Fee and Certified Copy.

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 21, 2015

HEMBREE & ASSOCIATES
1335 SECOND STREET
SARASOTA, FL 34236

SUBJECT: VIRGIN ISLANDS ASSOCIATES, L.L.L.P.
Ref. Number: A01000001164

We have received your document for VIRGIN ISLANDS ASSOCIATES, L.L.L.P. and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$17.50. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The form you submitted is for a CORPORATION, but your entity is a LLLP. Please complete and return the enclosed blank form(s).

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) 245-6051.

Jenna D Harris
Regulatory Specialist II

Letter Number: 615A00017713

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

**STATEMENT OF DISSOCIATION
FOR
GENERAL PARTNER
OF
LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP**

Pursuant to the provisions of section 620.1605, Florida Statutes, the undersigned general partner hereby dissociates from the following limited partnership or limited liability limited partnership:

1. The name of Limited Partnership or Limited Liability Limited Partnership is:

VIRGIN ISLANDS ASSOCIATES, LLP

2. The name of the dissociating general partner is:

DAVID S BAND


Signature of Dissociating General Partner

Filing Fee: \$52.50
Certified Copy (optional): \$52.50

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TALLAHASSEE FLORIDA