

A 02000000840

(Requestor's Name)

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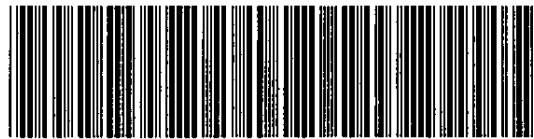
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

S. HAWKES

APR 14 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Bates Family Partners, L.L.L.P.
(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

DOCUMENT NUMBER: A02000000840

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

Please return all correspondence concerning this matter to:

Mark W. Bates

(Contact Person)

Bates Family Partners, L.L.L.P.

(Firm/Company)

P.O. Box 205

(Address)

Quincy, FL 32353-0205

(City, State and Zip Code)

For further information concerning this matter, please call:

Cathi C. Wilkinson

(Name of Contact Person)

at (850) 668-4130

(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

CR2E118 (01/06)

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

FILED
10 APR 13 PM 3:29
CLERK OF STATE
TALLAHASSEE, FLORIDA

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:

Bates Family Partners, L.L.P.

2. The name of the dissociating general partner is:

Nancy Bates Curley

Nancy Bates Curley

Signature of Dissociating General Partner

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