

A02000000880

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

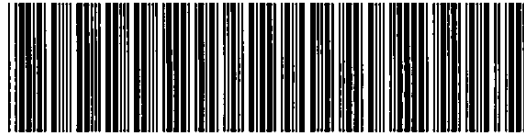
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500078148615

~~07/31/06 01021--024 **105.00~~

07/31/06--01021--024 **105.00

FILED
06 AUG -7 PM 12:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



FOWLER WHITE BOGGS BANKER

ATTORNEYS AT LAW

ESTABLISHED 1943

July 28, 2006

Corporate Records Bureau
Division of Corporations
Department of State
Post Office Box 6327
Tallahassee, Florida 32314

Re: Harlee Investments, Ltd.

Dear Sir/Ma'am:

Enclosed please find original Certificate of Dissolution and original Statement of Termination for the above-captioned limited partnership, along with our firm check in the amount of \$105.00 to cover the filing fees.

We would appreciate your filing the Certificate of Dissolution and Statement of Termination.

Thank you for your assistance.

Sincerely,

Amelia M. Campbell

AMC\dl
Enclosures

cc: Mr. John P. Harlee III (w/o encls.)
Mrs. Alice H. Boylston (w/o encls.)
Jeffrey L. King, CPA (w/o encls.)

#1855091v1

FOWLER WHITE BOGGS BANKER P.A.

TAMPA • ST. PETERSBURG • FORT MYERS • TALLAHASSEE • ORLANDO • NAPLES • WEST PALM BEACH • BONITA SPRINGS • JACKSONVILLE

501 EAST KENNEDY BLVD., SUITE 1700 • TAMPA, FLORIDA 33602 • P.O. BOX 1438 • TAMPA, FL 33601
TELEPHONE (813) 228-7411 • FAX (813) 229-8313 • www.fowlerwhite.com

FILED
06 AUG -7 PM 12:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DISSOLUTION
FOR**

Harllee Investmnets, Ltd.

(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 June 27, 2002, hereby submits this Certificate of Dissolution.

FIRST: Reason for dissolution: (State why partnership is submitting dissolution)

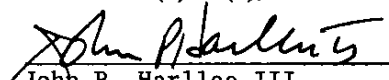
Liquidation of limited partnership

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.)

Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.:


John P. Harllee III


Alice H. Boylston

Filing Fee: \$52.50
Certified Copy (optional): \$52.50
Certificate of Status (optional): \$8.75

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

06 AUG - 7 PM 12:13

FILED