

A02000000966

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M. HODGES

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Four Mile Cove, Ltd.

(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

**DOCUMENT NUMBER:** A02000000966

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

Please return all correspondence concerning this matter to:

Marianne H. LePera, Esq.

(Contact Person)

Henderson Franklin

(Firm/Company)

3451 Bonita Bay Blvd., Suite 206

(Address)

Bonita Springs, FL 34134

(City, State and Zip Code)

For further information concerning this matter, please call:

Marianne H. LePera, Esq. at ( 239 ) 344-1366

(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

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

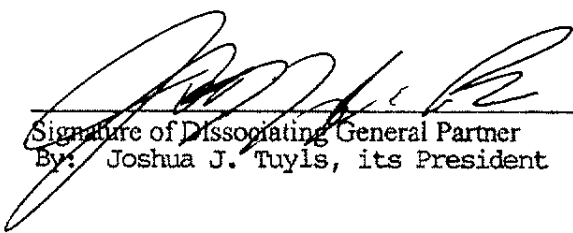
Pursuant to the provisions of section 620.1605, Florida Statutes, the undersigned general partner hereby dissociates from the following limited partnership or limited liability limited partnership:

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

Four Mile Cove, Ltd.

2. The name of the dissociating general partner is:

Four Mile Cove, Inc.

  
\_\_\_\_\_  
Signature of Dissociating General Partner  
By: Joshua J. Tuyls, its President

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

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