## A02000118

—;— (Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	

Office Use Only



400188149504

11/30/10--01023--009 \*\*52.50

10 NO 30 PH I2: 27

D. BRUCE

DEC 3 2010

**EXAMINER** 



Via US Certified Mail 7009 3410 0001 7760 1745 November 22, 2010

Registration Section
Florida Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee FL 32301

Re: Requests for Dissolution

Dear Sir or Madam:

Enclosed are Certificates for Dissolution and/or the Articles of Dissolution or Certificates of Dissolution for the following entities along with our checks for the respective filing fees:

Entity Name	Document #	Check #	<u>Amount</u>
Destin Partnership #4, Ltd.	A02000001118	159575	\$52.50
Destin Retail, Inc.	P98000004274	159574	35.00
Fog Sembler Capital PR 4, Limited, S.E.	A04000001908	160414	52.50
Fog Sembler Capital PR 6, Limited, S.E.	A05000001038	160413	52.50
Sembler/Treasure Retail, Inc.	P02000092405	159576	35.00

We respectfully request that the dissolutions be effective as of the date of filing.

Please return your letter acknowledging the filing of these dissolutions to my attention at the address shown below.

If you have any questions, please do not hesitate to contact my office.

Sincerely,

Deann Lazzari Wojcicki Chief Financial Officer

K DeannLtrs FLA DOS – Dissolutions -DP4-DRI–Fog4 Fog 6 ST Ret Inc - 11-22-10

**Enclosures** 

## **COVER LETTER**

÷

TO: Registratio Division of	n Section Corporations					
SUBJECT: Des	tin Partnership #4 of Florida Limited Partnersh	, Ltd. nip or Limited	Liability Lir	mited Partnershi	p)	_
The enclosed Certi	ficate of Dissolution a	nd fee(s) are	submitted	d for filing.		
Please return all co	rrespondence concerni	ng this matt	er to:			
Deann Lazzari Wojci	cki	_				
	(Contact Person)			,		
Destin Partnership #	2, Ltd.	,			مس بحز	
<u> </u>	(Firm/Company)	-				hoese
ole The Comblet Co					<b>3 3</b>	i i
C/O The Sembler Co	mpany 5858 Central Av (Address)	enue	<del></del>		SS 72	4 *****
	(Address)					[]
St. Petersburg, FL 3	3707-1728					£
	(City, State and Zip Code)	)			NW 2º PH 12: 27	*** 4 .961
					Sim J	
For further informa	tion concerning this m	atter, please	call:			
Deann Lazzari Wojci	cki	at ( 72	7 ) 38	84-6000, x3015	5	
(Name of Cor	ntact Person)			Daytime Teleph		
Enclosed is a check	for the following amo	ount:				
☑ \$52.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	\$105.00 and Certifi	Filing Fee led Copy	\$113.75 Certified Co	opy, and	
STREET ADDRE	SS:	N	AILING	ADDRESS:		
Registration Section			egistration			
Division of Corpora			-	Corporations	<b>;</b>	
Clifton Building			. O. Box 6			
2661 Executive Cer	nter Circle	T	allahassee	e, FL 32314		
Tallahassee, FL 32	301					

## CERTIFICATE OF DISSOLUTION FOR

Destin Partnership #4, Ltd.			
(Name of Florida Limited Par	rtnership or Limited Liability Limited Partner	ship)	
partnership or limited liability limite Florida Department of State on Augu	d 620.1203, Florida Statutes, this Florida d partnership, whose certificate was find the state of the state o	led with the ned Florida	
FIRST: Reason for dissolution: (St	tate why partnership is submitting diss	olution)	
No longer doing business. Tax year 200	09 is the final return filing for this limited p	artnership.	
			•
		O No	•
	12.594,0-485	- <u> </u>	,
SECOND: A Notice of Dissol	ution is attached.		, l
(Check box if attac		S H	-
THIRD: Effective date, if other than the da	ate of filing:	*27 TATE ORIO	~~
(Effective date cannot be prior to nor more Department of State.)	than 90 days after the date this document is fi	led by the Florida	
Signatures of each general partner or s. 620.1803(3) for (4). E.S.:	r the person appointed pursuant to		
Theyngo Dembly			
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75		

## NOTICE OF DISSOLUTION FOR FLORIDA LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

This notice is submitted by the dissolved limited partnership or limited liability limited partnership named below or the successor entity for resolution of payment of unknown claims against this limited partnership or limited liability limited partnership as provided in s. 620.1807, F.S.

This "Notice of Dissolution" is optional and is not required when filing a Certificate of Dissolution.

Name of Dissolved Limited Partnership or Limited Liability Limited Partnership: Destin Partnership #4, Ltd. Description of information that must be included in a claim: The above-referenced Florida Limited Partnership desires to be dissolved as it is no longer doing business, and therefore should be listed as an inactive status. Mailing address where claims can be sent: (Claims cannot be sent to the Florida Department of State.) 5858 Central Avenue St. Petersburg, FL 33707-1728 A claim against the above named limited partnership or limited liability limited partnership will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of the notice. Signature of a general partner or a principal of the successor entity: Gregory S. Sembler Printed Name

Fee: No charge if included with Certificate of Dissolution. If filed separately, \$52.50.