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(Re	equestor's Name)			
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP	☐ WAIT	MAIL		
(Bu	isiness Entity Na	me)		
	•			
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Certified Copies	_ Certificate	s of Status		
Special Instructions to	Filing Officer:			
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SECRETIVELY OF STATE
ALLAF ASSEE, FLORIDA

COVER LETTER

TO: Registration Division of	n Section Corporations	. <u>-</u> :	
SUBJECT: PTL	, LTD.		had Dawn (Ca)
The enclosed Certi		nip or Limited Liability Limind fee(s) are submitted	• •
	•	ing and matter to.	
Sandra F Fort		·	
	(Contact Person)		TAIS 2
PTL, LLC			
(00 m O)	(Firm/Company)		AHA VE T
1325 Chesapeake Drive		RETARY I	
	(Address)		T R
Odessa FL 3	3556		
	(City, State and Zip Code))	STATE
For further informa	tion concerning this m	atter, please call:	
Sandra F Fort	na	at (813) 92	0-4625
(Name of Cor	ntact Person)		Daytime Telephone Number)
Enclosed is a check	for the following amo	ount:	
✓ \$52.50 Filing Fee	☐ \$61.25 Filing Fee and Certificate of Status	S105.00 Filing Fee and Certified Copy	\$113.75 Filing Fee, Certified Copy, and Certificate of Status
STREET ADDRE Registration Section Division of Corpora Clifton Building 2661 Executive Cer Tallahassee, FL 32	n ations nter Circle	MAILING Registration Division of O P. O. Box 63 Tallahassee,	Section Corporations 327

CERTIFICATE OF DISSOLUTION FOR

PTL, 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 September 6, 2002, hereby submits this Certificate of Dissolution.	
FIRST: Reason for dissolution: (State why partnership is submitting dissolution)	
All assets have already been transferred to another entity	
and all affairs have been wound up and no business is	
being conducted.	
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.:	
Souda & fortra	
Filing Fee: \$52.50	
Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	