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(Req	uestor's Name)				
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(City	/State/Zip/Phon	e #)			
		MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificate	s of Status			
Special Instructions to Filing Officer:					
	Office Use Or	ıly			



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MAR 2 8 2017 Y SULKER

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: Greens tone Florida Management Linited Partmership (Name of Florida Limited Partnership or Limited Liability Limited Partnership)

The enclosed Certificate of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Hoal W. Knight, Jr (Contact Person) Neal W. Knight, Jr. 11c (Firm/Company) 840 U.S. Highwar One - Suite 100 (Address) <u>N. Palm Brach.71 33408</u> (City, State and Zip Code)

For further information concerning this matter, please call:

Name of Contact Person) at (<u>561</u>) <u>351-1191</u> (Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

S52.50 Filing Fee

\$61.25 Filing Fee and Certificate of Status

s105.00 Filing Fee and Certified Copy S113.75 Filing Fee, Certified Copy, and Certificate of Status

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

CERTIFICATE OF DISSOLUTION FOR

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Greenstone Florida Management Limited Par (Name of Florida Limited Partnership or Limited Liability Limited Partnership)	tnership
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 <u>March 19, 2003</u> , assigned Florida document number <u>A030000000, 4,36</u> , hereby submits this Certificate of Dissolution.	
FIRST: Reason for dissolution: (State why partnership is submitting dissolution)	
All associe have been distributed	
	_
SECOND: A Notice of Dissolution is attached. (Check box if attached.)	17 M
THIRD: Effective date, if other than the date of filing:	-12 AR 21
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Flori Department of State.)	
Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.:	
Greenstone G.P. Inc. General Partner of Greenstone Flanda Managem	Burtnership
By: Karen Tenaglia	
Its: President	
Filing Fee: \$52.50 Certified Copy (optional): \$52.50	
Certificate of Status (optional): \$8.75	