## A03000000862

(Requestor's Name)				
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TALLAHASSEE, FLORIDA

B. BOSTICK

MAY 1 3 2011

EXAMINER

## COVER LETTER

Corporations						
Florida Limited Partnersh	iip or Lin	nited Liability Lim	ited Partnership	)		
cate of Dissolution ar	nd fee(s	) are submitted	for filing.			
respondence concerni	ng this	matter to:				
(Contact Person)		<del></del>				
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				69 (2) 194	<b>\Q</b>	THE COMM
ion concerning this m	atter, p	lease call:				Same 5
	at (	954 ) 92°	1-5070	STAT	e S	"Lagraga"
act Person)	(_	(Area Code and D	aytime Telepho	ne Number	<del>)</del>	
for the following amo	unt:					
\$61.25 Filing Fee and Certificate of Status			Certified Cop	py, and		
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		Registration Division of OP. O. Box 63	Section Corporations 327			
	Corporations  T Street Apartme Florida Limited Partnersh Cate of Dissolution ar respondence concerni  (Contact Person)  Its LLC (Firm/Company)  (Address)  City, State and Zip Code)  ion concerning this mater Person)  for the following amount of the status  Status  S: tions  ter Circle	Corporations  Telect Apartments LL Florida Limited Partnership or Lin Cate of Dissolution and fee(s respondence concerning this  (Contact Person)  Its LLC (Firm/Company)  (Address)  City, State and Zip Code)  ion concerning this matter, pl  at (	r Street Apartments LLLP Florida Limited Partnership or Limited Liability Limicate of Dissolution and fee(s) are submitted respondence concerning this matter to:  (Contact Person)  hts LLC (Firm/Company)  (Address)  (City, State and Zip Code)  ion concerning this matter, please call:  at (954) 92: (Area Code and Distribution of the following amount:  \$\int_{\text{sol}} \frac{\$51.25 \text{ Filing Fee}}{\$105.00 \text{ Filing Fee}} \frac{\$105.00 \text{ Filing Fee}}{\$105.00 \text{ Filing Fee}} \	Corporations  r Street Apartments LLLP  Florida Limited Partnership or Limited Liability Limited Partnership cate of Dissolution and fee(s) are submitted for filing.  respondence concerning this matter to:  (Contact Person)  Ints LLC (Firm/Company)  (Address)  City, State and Zip Code)  ion concerning this matter, please call:  at ( 954  ) 921-5070  act Person)  for the following amount:    \$61.25 Filing Fee and Certificate of Status   \$105.00	Temperations  Temperations  Temperature Apartments LLLP  Florida Limited Partnership or Limited Liability Limited Partnership)  The cate of Dissolution and fee(s) are submitted for filing.  Temperature to:  Tem	Corporations  r Street Apartments LLLP Florida Limited Partnership or Limited Liability Limited Partnership)  cate of Dissolution and fee(s) are submitted for filing.  respondence concerning this matter to:  (Contact Person)  ints LLC  (Firm/Company)  (Address)  City, State and Zip Code)  at ( 954     ) 921-5070  act Person)  for the following amount:    S61.25 Filing Fee

## CERTIFICATE OF DISSOLUTION FOR

=

(Name of Florida Limited P	LLP artnership or Limited Liability Limit	ted Partnership)
Pursuant to the provisions of section partnership or limited liability limit Florida Department of State on Jur document number A03000000862 Dissolution.	ed partnership, whose certificate 10, 2003	ate was filed with the, assigned Florida
FIRST: Reason for dissolution: (	State why partnership is submi	tting dissolution)
Real Estate has been sold.		
		AG:
		LAH/
	olution is attached.	COS NO PROPERTY OF THE PROPERT
(Check box if atta THIRD: Effective date, if other than the	·	1 9: 2: FLORIC
(Effective date cannot be prior to nor more Department of State.)		rument is filed by the Florida
Signatures of each general partner of s. 620.1803(3) or (4), F.S.:	or the person appointed pursua	nt to
Till		
M. MBR EAGLE CLAW INVESTMENTS LI GENERAL PARTNER		
Filing Fee: Certified Copy (optional):	\$52.50 \$52.50	
Certificate of Status (optional):	\$8.75	



April 27, 2011

TONY ANGELLA EAGLE CLAW INVESTMENTS LLC POST OFFICE BOX 398 DANIA, FL 33004

SUBJECT: ARTHUR STREET APARTMENTS LLLP

Ref. Number: A03000000862

We have received your document for ARTHUR STREET APARTMENTS LLLP and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The attached form must be completed in order to file the document.

The document must be signed by all of the general partners.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6028.

Letter Number: 511A00010214

Barbara Bostick Regulatory Specialist II

www.sunbiz.org