

A04000000077

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

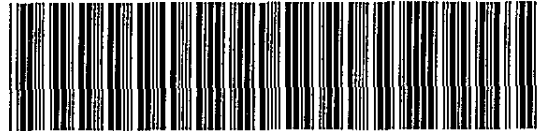
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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Office Use Only



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01/20/06--01007--005 \*\*25.00

02/15/06--01038--012 \*\*27.50

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

4 p  
form

W 02/16/06



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

January 27, 2006

ZENG YU  
SUNSHINE ASSOCIATES LTD  
2013 SPIRIT WAY  
SAN LEANDRO, CA 94579

SUBJECT: SUNSHINE ASSOCIATES LTD  
Ref. Number: A04000000077

We have received your document for SUNSHINE ASSOCIATES LTD and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$27.50. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The form you submitted is for a general partnership, but your entity is a limited partnership. Enclosed is the proper form for your limited partnership.

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) 245-6958.

Lee Rivers  
Document Specialist

Letter Number: 806A00005961

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06 FEB 15 PM 4:01  
TALLAHASSEE, FLORIDA  
DIVISION OF CORPORATIONS

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Sunshine Associates LTD  
(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:

Zeng Yu  
(Contact Person)

\_\_\_\_\_  
(Firm/Company)

2013 Spirit Way  
(Address)

San Leandro, CA 94579  
(City, State and Zip Code)

For further information concerning this matter, please call:

Zeng Yu at ( 925 ) 998-2372  
(Name of Contact Person) (Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$52.50 Filing Fee      ☐ \$61.25 Filing Fee and Certificate of Status      ☐ \$105.00 Filing Fee and Certified Copy      ☐ \$113.75 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

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TALLAHASSEE, FLORIDA

**CERTIFICATE OF DISSOLUTION  
FOR**

Sunshine Associates 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 Feb-5, 2006, hereby submits this Certificate of Dissolution.

**FIRST:** Reason for dissolution: (State why partnership is submitting dissolution)

The property (Village Motel, 401 34th Street North  
St. Petersburg, FL 33713) had been sold.

**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.:

[Signature]  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Filing Fee:** \$52.50  
**Certified Copy (optional):** \$52.50  
**Certificate of Status (optional):** \$8.75

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**FILED**