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(Re	equestor's Name)	
(Ad	ldress)	•
(Ad	ldress)	<u></u>
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
		•
(Bu	ısiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer.	
	•	

Office Use Only



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15 DEC 31 PM SE OF SECRETARY OF STATE AND LANASSEE, PLORIDA

'JAN 0 4 2016 S. YOUNG

COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Woodstock, LLLP (Name of Florida Limited Partnership or Limited Lia	ability Limited Partnership)
The enclosed Certificate of Dissolution and fee(s) are su	ibmitted for filing.
Please return all correspondence concerning this matter	to:
Paige Poole Poechmann	
(Contact Person)	
Poole & Poole, P.A.	
(Firm/Company)	Eg a n
303 Centre Street, Suite 200	
(Address)	
Fernandina Beach, FL 32034	MR 22 C
(City, State and Zip Code)	- 5.
For further information concerning this matter, please ca	all:
Paige Poole Poechmann at (904) 261-0742
(Name of Contact Person) (Area C	Code and Daytime Telephone Number)
Enclosed is a check for the following amount:	
\$52.50 Filing Fee \$\frac{1}{2}\$\$61.25 Filing Fee and Certificate of Status \$\frac{1}{2}\$\$\$105.00 Fi and Certified	
Registration Section Corporations Division of Corporations Division Building P. Co.	AILING ADDRESS: cistration Section ision of Corporations D. Box 6327 lahassee, FL 32314

CERTIFICATE OF DISSOLUTION FOR

Woodstock, LLLP	rtnership or Limited Liability Limited Partnership)	9
Pursuant to the provisions of section	620.1203, Florida Statutes, this Florida limi d partnership, whose certificate was filed wit 5/2004, assigned Flo	th the
FIRST: Reason for dissolution: (St	ate why partnership is submitting dissolution	a)
A liquidating event as defined by the Op	erating Agreement has occurred, and pursuant t	o the terms
of the same, the Partnership must be dis	ssolved. Specifically, substantially all of the Part	nership
Property has been sold.		拉图
		國智工
SECOND: A Notice of Dissol (Check box if attac		31 PM 5:
THIRD: Effective date, if other than the da	ate of filing: October 30, 2015	
(Effective date cannot be prior to nor more in Department of State.)	than 90 days after the date this document is filed by th	he Florida
Signatures of each general partner or s. 620.1803(3) or (4), F.S.:	the person appointed pursuant to	
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75	

Copy to thom or in the sent of the or in the sent of the or in the sent or in the

\$52.50.

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:	
WOODSTOCK, LLLP	
Description of information that must be included in a claim:	
	ALC:
	子(5)
	Fine Ting
Mailing address where claims can be sent: (Claims cannot be sent to the Florida Department of State.)	LONDA
4 North Second Street, Suite 300	
Fernandina Beach, FL 32034	
A claim accide the sharp manual their description is a little of the sharp manual their sharp manual the sharp manual their sharp manual their sharp manual their sharp manual the sharp manual their sharp manual the shar	
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 4 years after the filing of the notice.	within
Signature of a general partner or a principal of the successor entity:	•
James B. Ferguson Printed Name Signature	m
Fee: No charge if included with Certificate of Dissolution. If filed separately	,