



A04000000534

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

October 7, 2009

JDAMLKS FAMILY LIMITED PARTNERSHIP  
C/O JONATHAN H GREEN ESQ  
799 BRICKELL PLAZA, STE 700  
MIAMI, FL 33131

000161489180

SUBJECT: JDAMLKS FAMILY LIMITED PARTNERSHIP

DOCUMENT NUMBER: A04000000534

Enclosed is a Certificate of Revocation revoking the authority of JDAMLKS FAMILY LIMITED PARTNERSHIP, to transact business in Florida. This revocation is in accordance with Chapter 620, Florida Statutes.

If you have any questions concerning the enclosed information or regarding the reinstatement, please contact the Partnership Section, Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 (850) 245-6051.

# State of Florida



## Department of State

I certify that the Department of State issued statutory notice of the intent to revoke JDAMLKS FAMILY LIMITED PARTNERSHIP, pursuant to section 620.178, Florida Statutes.

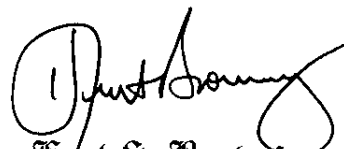
I further certify that the Authority to Transact Business of said Limited Partnership was revoked as of October 7, 2009, in compliance with section 620.178(1)(a), Florida Statutes.

The document number of this Limited Partnership is A04000000534.

Given under my hand and the  
Great Seal of the State of Florida  
at Tallahassee, the Capitol, this the  
Seventh day of October, 2009



CR2EO22 (01-07)

  
Kurt S. Browning  
Secretary of State



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

July 1, 2009

JDAMLKS FAMILY LIMITED PARTNERSHIP  
C/O JONATHAN H GREEN ESQ  
799 BRICKELL PLAZA, STE 700  
MIAMI, FL 33131

SUBJECT: JDAMLKS FAMILY LIMITED PARTNERSHIP  
Ref. Number: A0400000534

Debit Memo #: 96823-M1

This is to inform you that your check #? in the amount of \$500.00 and submitted for the annual report of JDAMLKS FAMILY LIMITED PARTNERSHIP has been returned to us by your bank because of ?.

As we cannot take credit card information over the phone, we request that you remit a cashier's check or money order in amount of \$525.00 made payable to the Department of State. This amount will cover the unpaid fees and the service fee required by law under section 215.34, Florida Statutes.

When sending the cashier's check or money order, please refer to the debit memo number listed above and state that it is a replacement for the returned check mentioned above.

Section 620.178, Florida Statutes, requires us to give at least 60 days notice of our intent to revoke the certificate of authority of a limited partnership for failure to file the annual report and pay the filing fee. This will serve as your notice that if payment of \$525.00 is not received within 60 days, your limited partnership's certificate of authority will be revoked and a reinstatement fee of an additional \$500 a year or part of a year will be imposed.

Send the replacement check to:

Division of Corporations  
Attn: Catherine F Chin  
P.O. Box 6327  
Tallahassee, FL 32314

If you have any questions concerning this matter, please call (850) 245-6057.

Sincerely,  
Catherine F Chin  
Senior Clerk  
Division of Corporations

Letter number: 209A00022557