

A04000000646

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(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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FILED  
2009 JUN 29 AM 8:48  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

C. LEWIS

JUL 14 2009

EXAMINER



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 30, 2009

RICHARD A. SCALONE  
1625 S. CONGRESS AVE.  
SUITE 100  
DELRAY BEACH, FL 33445

SUBJECT: INTEGRA INVESTMENT MANAGEMENT, LIMITED PARTNERSHIP  
Ref. Number: A04000000646

We have received your document for INTEGRA INVESTMENT MANAGEMENT, LIMITED PARTNERSHIP and check(s) totaling \$25.00 of which \$ has been designated to file this document. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is an additional amount of \$27.50 due. 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.

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of 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) 245-6047.

Carolyn Lewis  
Regulatory Specialist II  
Registration/Qualification Section

Letter Number: 209A00022444

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Integra Investment Management Limited Partnership

(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:

Richard Scalone

(Contact Person)

(Firm/Company)

1625 S Congress Ave Suite 100

(Address)

Delray Beach, FL 33445

(City, State and Zip Code)

For further information concerning this matter, please call:

Carmelyn Murphy

(Name of Contact Person)

at ( 561 ) 995-9997

(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

**CERTIFICATE OF DISSOLUTION  
FOR**

**FILED**

2009 JUN 29 AM 8:48

**Integra Investment Management Limited Partnership**  
(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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 04/19/2004, assigned Florida document number A04000000646, hereby submits this Certificate of Dissolution.

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

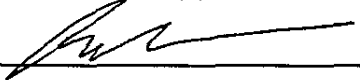
Business ceased.

**SECOND:** ☐ A Notice of Dissolution is attached.  
(Check box if attached.)

**THIRD:** Effective date, if other than the date of filing: 6/30/2009

*(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.:



\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

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