A05000000 207

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COVER LETTER

TO: Registration Section			
Division of Corporations			
SUBJECT: PRESERVES OF OAKWOOD, 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: VANESSA W. HANSEN			
(Contact Person)			
PRESERVES OF OAKWOOD, LTD.			
(Firm/Company)	-		
942 AVENIDA MAJORCA, UNIT B	_		
(Address)			
LAGUNA WOODS, CA 92637			
(City, State and Zip Code)	=		
For further information concerning this matter, please call:	SAL S	2018 DEC 18	
VANESSA W. HANSEN 949 472-1192 at ()	验	EC 13	CHESTICAL
(Name of Contact Person) (Area Code) (Daytime Telephone Number)		P	F
Enclosed is a check for the following amount:	EL TELOTA	2:31	<u>.</u>
\$52.50 Filing Fee S61.25 Filing Fee and Certificate of Status Status S105.00 Filing Fee S113.75 Filing S113.75	, and		

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

PRESERVES OF OAKWOOD, LTD.			
(Name of Florida Limited Partnership or	Limited Liability	y Limited Partnership)	
Pursuant to the provisions of section partnership or limited liability limited Florida Department of State on JANU document number A05000000207 Dissolution.	ed partnership, JARY 28, 2005		n the
FIRST: Reason for dissolution: (S	tate why partn	ership is submitting dissolution)
THE PARTNERSHIP IS NO LONGER CO	ONDUCTING B	USINESS.	
SECOND: A Notice of Dissol (Check box if at		ed.	2010 DEG
THIRD: Effective date, if other than the (Effective date cannot be prior to nor more	date of filing: Di	ECEMBER 20, 2018 er the date this document is filed by th	e Florida
Department of State.) Note: If the date inserted in this block does not be listed as the document's effective da	not meet the app	olicable statutory filing requirements, t	
			5° -
Signatures of each general partner or the po	erson appointed p	ursuant to s. 620.1803(3) or (4), F.S.:	
Island Wiele	-pron	Glonza Willz	AM S
Vanus-Wi-Hansen	=	Vanessa W. Hans	Ru
Filing Fee:	\$52.50		
Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$8.75		
	J		