

A05000000277

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Office

Wrong form
Submitted GP form not LP

Stmnt. of Diss-LP

Office Use Only

7/13



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07/10/06--01037--007 **86.25

07/31/06--01005--024 **27.50

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
06 JUL 31 PM 2:25

883

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: LJW PALM BEACH ESTATES, 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:

DAVE WILLIAMS

(Contact Person)

WOERNER MANAGEMENT, INC.

(Firm/Company)

777 S. FLAGLER DR., SUITE 1100 EAST

(Address)

WEST PALM BEACH, FL. 33401

(City, State and Zip Code)

For further information concerning this matter, please call:

DAVE WILLIAMS

(Name of Contact Person)

at (561) 837-3747

(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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 13, 2006

T. DAVID WILLIAMS JR.
WOERNER MANAGEMENT, INC.
777 S. FLAGLER DRIVE, STE. 1100 EAST
WEST PALM BEACH, FL 33401

SUBJECT: LJW PALM BEACH ESTATES, LTD.
Ref. Number: A05000000277

We have received your document for LJW PALM BEACH ESTATES, LTD. and your check(s) totaling \$86.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a general partnership, but your entity is a limited partnership. Please complete and return the enclosed blank form(s).

There is a balance due of \$27.50.

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) 245-6853.

Leslie Sellers
Document Specialist

Letter Number: 806A00045145

**CERTIFICATE OF DISSOLUTION
FOR**

LJW PALM BEACH ESTATES, 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 01/31/2005, hereby submits this Certificate of Dissolution.

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

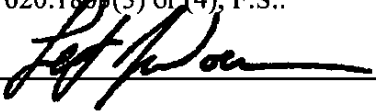
SOLE ASSET SOLD; OUT OF BUSINESS

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

THIRD: Effective date, if other than the date of filing: 07/31/2006

(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. 620.188(3) or (4), F.S.:



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

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