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COVER LETTER

Division of	Corporations		
SUBJECT: SUM	IMERLAND I, LTD)	
(Name o	f Florida Limited Partnersh	ip or Limited Liability Lim	ited Partnership)
The enclosed Certif	ficate of Dissolution an	nd fee(s) are submitted	for filing.
Please return all co	rrespondence concerni	ng this matter to:	
SHARON L. GINSBU	· IRG		
<u> </u>	(Contact Person)		
			200 TAL
	(Firm/Company)		9 H/ CR LA
1308 SUMMERLANI	O AVENUE		HAX HAX
	(Address)		SEE SEE
WINTER PARK, FL	32789		C. P.
	(City, State and Zip Code)		909 MAY -8 PM 4: 1 SECRETARY OF STATE ALLAHASSEE, FLORIC
			IIIDA
For further informa	tion concerning this m	atter, please call:	
DALBERT B. GINSBERG		at (202) 223	3.5000
(Name of Cor	ntact Person)	(Area Code and D	Daytime Telephone Number)
Enclosed is a check	for the following amo	ount:	
₹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 ADDRE	SS:	MAILING	ADDRESS:
Registration Section		Registration Section	
Division of Corporations		Division of Corporations	
Clifton Building 2661 Executive Center Circle		P. O. Box 6327 Tallahassee, FL 32314	
Tallahassee, FL 32		1 41141143300,	۱۱۱ بهر ساه

CERTIFICATE OF DISSOLUTION FOR

SUMMERLAND I, 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 MAY 12, 2005, assigned Florida document number A05000000957, hereby submits this Certificate of Dissolution.
FIRST: Reason for dissolution: (State why partnership is submitting dissolution)
DISSOLUTION WAS DETERMINED BY THE CONSENT OF THE MEMBERS. NO BUSINESS
ACTIVITY EVER COMMENCED FOR THIS ENTITY.
and the same of th
SECOND: A Notice of Dissolution is attached. (Check box if attached.)
THIRD: Effective date, if other than the date of filing: MAY 15, 2009
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by Before Department of State.)
Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.:
Al MSbury
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75