## A056000 1411

(Re	equestor's Name)	
(Ac	ldress)	
i g	idress)	
(Ci	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL MAIL
(Bi	usiness Entity Name	e)
(Dc	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
ţ	Office Use Only	



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12/18/14--01021--002 \*\*52.50

15 JAN -2 AM 9:00 SECRETARY OF STATE TALL AHASSEE, FLORIO



December 22, 2014

ronald clark 500 s florida ave suite 800 lakeland, FL 33801

SUBJECT: ODYSSEY OPERATING PARTNERSHIP II, LTD.

Ref. Number: A05000001411

We have received your document for ODYSSEY OPERATING PARTNERSHIP II, LTD. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

A general partner must sign the document.

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) 245-6051.

Justin M Shivers
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 614A00027025

## COVER LETTER

Division of	Corporations				
	ssey Operating Pa				
(Name o	f Florida Limited Partnersh	up or Lim	iited Liabili	ty Limi	ted Partnership)
The enclosed Certi	ficate of Dissolution ar	nd fee(s)	are subm	itted f	for filing.
Please return all co	rrespondence concerni	ng this 1	natter to:		
Ronald L. Clark					
	(Contact Person)			_	
Clark, Campbell, Lar	ncaster & Munson, P.A.				
	(Firm/Company)			_	
500 South Florida Av	venue, Suite 800				
	(Address)			-	
Lakeland, Florida 33	801				
	(City, State and Zip Code)			-	
For further informa	tion concerning this m	atter, pl	ease call:		
Justin Callaham		at (	863	) 647	-5337
(Name of Cor	ntact Person)		(Area Code	and Da	aytime Telephone Number)
Enclosed is a check	for the following amo	ount:			
₹ \$52.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status		05.00 Filing ertified Cop		\$113.75 Filing Fee, Certified Copy, and Certificate of Status
STREET ADDRE	SS:		MAIL	ING A	ADDRESS:
Registration Section		Registration Section			
Division of Corpora	ations				Corporations
Clifton Building			P. O. B		
2661 Executive Cer			Tallaha	issee,	FL 32314
Tallahassee, FL 32	301				

## CERTIFICATE OF DISSOLUTION FOR

+

Department of State.)	By: Robert L. Madden
Department of State.)  Signatures of each general partner of s. 620.1803(3) or (4), F.S.:  Odyssey Diversified Properties, Inc.	nc., as  Robert R. Madden  By: Robert L. Madden
Department of State.)  Signatures of each general partner of s. 620.1803(3) or (4), F.S.:	nc., as Robert R. Mander
Department of State.)  Signatures of each general partner of	
(Effective date cannot be prior to nor more	re than 90 days after the date this document is filed by the Florida
THIRD: Effective date, if other than the o	date of filing:
SECOND: A Notice of Disso (Check box if atta	
interest of Odyssey Operating Partners	rship II, Ltd.'s general partner, limited partners, and creditors.
The general partner believes that the d	dissolution of Odyssey Operating Partnership II, Ltd. is in the
FIRST: Reason for dissolution: (S	(State why partnership is submitting dissolution)
Florida Department of State on 07/	on 620.1203, Florida Statutes, this Florida limited ited partnership, whose certificate was filed with the //19/2005, assigned Florida, hereby submits this Certificate of