

A06000001150

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

A06-1150

(Document Number)

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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 MAY -5 AM 10:11

N. Culligan MAY -5 2011

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: TL NOBLE 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:

ROBERT M. TAYLOR

(Contact Person)

(Firm/Company)

13451 MCGREGOR BOULEVARD, SUITE 27

(Address)

FORT MYERS, FL 33919

(City, State and Zip Code)

For further information concerning this matter, please call:

EDWINA VEILLETTE

(Name of Contact Person)

at (

239)

481-2011, ext 191

(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

April 5, 2011

ROBERT M. TAYLOR
13451 MCGREGOR BLVD., SUITE 27
FORT MYERS, FL 33919

SUBJECT: TL NOBLE LIMITED PARTNERSHIP
Ref. Number: A06000001150

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

The effective date must be specific and cannot be prior to the date of filing.

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) 245-6067.

Neysa Culligan
Regulatory Specialist II

Letter Number: 611A00008161

**CERTIFICATE OF DISSOLUTION
FOR**

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 MAY -5 AM 10:12

TL NOBLE LIMITED PARTNERSHIP

(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 OCTOBER 3, 2006, assigned Florida document number A06000001150, hereby submits this Certificate of Dissolution.

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

Limited Partnership dissolved

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

THIRD: Effective date, if other than the date of filing: _____

(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.:

[Signature] GENERAL PARTNER
Linda K. Taylor GENERAL PARTNER

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