

FILED  
SECRETARY OF STATE  
DIVISION OF CERTIFICATION  
10 APR 26 PM 12:17

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Tradition Atlantic, Ltd.

(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

**DOCUMENT NUMBER:** A06000001368

The enclosed Statement of Dissociation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

**Wanda Penland**

(Contact Person)

**Schrimsher Properties**

(Firm/Company)

**600 East Colonial Drive, Suite 100**

(Address)

**Orlando, Florida 32803**

(City, State and Zip Code)

For further information concerning this matter, please call:

**Wanda Penland**

(Name of Contact Person)

at ( 407 ) 423-7600

(Area Code and Daytime Telephone Number)

☒ \$52.50 Filing Fee

☐ \$105.00 Filing Fee and Certified Copy.

**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

CR2E118 (01/06)

**STATEMENT OF DISSOCIATION  
FOR  
GENERAL PARTNER  
OF  
LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP**

Pursuant to the provisions of section 620.1605, Florida Statutes, the undersigned general partner hereby dissociates from the following limited partnership or limited liability limited partnership:

1. The name of Limited Partnership or Limited Liability Limited Partnership is:

Tradition Atlantic, Ltd.

2. The name of the dissociating general partner is:

BSP/Atlantic, LLC

*Ken J. Kuyper* AS MANAGER  
Signature of Dissociating General Partner

Filing Fee: \$52.50  
Certified Copy (optional): \$52.50

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