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Certified Copies Certificates of Status			
Special Instructions to	Eiling Officer		
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G. MCLEOD

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EXAMINER

## **COVER LETTER**

Division of C						
SUBJECT: HARMONY INNOVATIVE SOLUTIONS, LP  (Name of Florida Limited Partnership or Limited Liability Limited Partnership)						
(Name of	Florida Limited Partnership	o or Limited Liability Limi	ited Partnership)			
The enclosed Certificate of Dissolution and fee(s) are submitted for filing.						
Please return all corr	espondence concernin	g this matter to:				
	CONRAD, PRE					
HERITAGE INN	OVATIVE SOLUTION (Firm/Company)	5, Ivc.				
PO BOX 37678	(Address)					
JACKSONVILL	(Address)  E FL 32236  City, State and Zip Code)	•				
For further information concerning this matter, please call:						
ROBERT E. C	CONRAD	at ( 904 ) 76	S6-2110 aytime Telephone Number)			
(Name of Cont	act Person)	(Area Code and D	aytime relephone 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 Corporat Clifton Building 2661 Executive Cen Tallahassee, FL 323	tions ter Circle	MAILING A Registration Division of O P. O. Box 63 Tallahassee,	Section Corporations 27			

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## CERTIFICATE OF DISSOLUTION FOR

HARMONY INNOVATIVE	SOLUTIONS, LP			
(Name of Florida Limited Pa	tnership or Limited Liability L	imited Partnership)		
Pursuant to the provisions of section partnership or limited liability limited Florida Department of State on <u>DE</u> Certificate of Dissolution.	d partnership, whose certi	ificate was filed with the		
FIRST: Reason for dissolution: (S	ate why partnership is sul	omitting dissolution)		
No BUSINESS				
		-		
SECOND: A Notice of Dissol (Check box if attac				
THIRD: Effective date, if other than the c	ate of filing: DECEMS E	FR 31, 2007.		
(Effective date cannot be prior to nor more Department of State.)	than 90 days after the date this	document is filed by the Florida		
Signatures of each general partner of s. 620.1803(3) or (4), F.S.:	the person appointed pur	suant to		0
Robert E. Conrad	<del></del>		180	SE
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Filing Fee: Certified Copy (optional):	\$52.50 \$52.50		l: 38	ÃI AI
Certificate of Status (optional):	\$8.75		3,	XO E