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EXAMINER



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COVER LETTER

TO:

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Registration Section

Division of Corporations **SUBJECT:** HALE FAMILY LIMITED PARTNERSHIP II (Name of Florida Limited Partnership or Limited Liability Limited Partnership) The enclosed Notice of Dissolution and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: Charles Diez, Jr. (Contact Person) Diez & Floyd, P.A. (Firm/Company) 737 South Indiana Avenue (Address) Englewood, Florida 34223 (City, State and Zip Code) For further information concerning this matter, please call: Charles Diez, Jr. (Name of Contact Person) (Area Code and Daytime Telephone Number) Enclosed is a check for the following amount: \$52.50 Filing Fee \$61.25 Filing Fee ☐ \$105.00 Filing Fee ☐ \$113.75 Filing Fee, and Certificate of Certified Copy, and and Certified Copy Status Certificate of Status STREET ADDRESS: MAILING ADDRESS: Registration Section Registration Section **Division of Corporations Division of Corporations**

P. O. Box 6327

Tallahassee, FL 32314

CERTIFICATE OF DISSOLUTION FOR HALE FAMILY LIMITED PARTNERSHIP II

Under the provisions of F.S. 620.1203, this Florida limited partnership, whose certificate was filed with the Florida Department of State on December 18, 2007, hereby submits this certificate of dissolution.

FIRST:

Reason for dissolution: All assets have been disposed of at the date of this filing.

SECOND:

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This certificate of dissolution shall be effective at the time of its filing with the

Florida Department of State.

Signatures of all general partners:

Dated: **2**, 2012.

Hale Family Limited Partnership II

BY: Patricia Anne Hale, Member