

A07839

**Florida Department of State
Division of Corporations
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Division of Corporations
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TALLAHASSEE, FLORIDA

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DISS/TERM/CANCEL/REV OF LP/LLP

BOOTH LIMITED

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$52.50

06024

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07 DEC 28 AM 8:41

SECRETARY OF STATE
TALLAHASSEE FLORIDA

**CERTIFICATE OF DISSOLUTION
FOR**

Booth 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 August 22, 1979, hereby submits this Certificate of Dissolution.

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

Each of the general partner and limited partner of the limited
partnership have resolved to dissolve the limited partnership

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.:

Matthew S. Hong
Vice President Treasurer

Manor Care, Inc.

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

**NOTICE OF DISSOLUTION
FOR
FLORIDA LIMITED PARTNERSHIP
OR LIMITED LIABILITY LIMITED PARTNERSHIP**

This notice is submitted by the dissolved limited partnership or limited liability limited partnership named below or the successor entity for resolution of payment of unknown claims against this limited partnership or limited liability limited partnership as provided in s. 620.1807, F.S.

This "Notice of Dissolution" is optional and is not required when filing a Certificate of Dissolution.

Name of Dissolved Limited Partnership or Limited Liability Limited Partnership:

Booth Limited Partnership

Description of information that must be included in a claim:

Amount of alleged claim and brief statement of facts giving rise
thereto

Mailing address where claims can be sent: (Claims cannot be sent to the Florida Department of State.)

333 N. Summit St., Toledo, OH 43604

A claim against the above named limited partnership or limited liability limited partnership will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of the notice.

Signature of a general partner or a principal of the successor entity:

Matthew S. Kang

Printed Name

Matthew S. Kang
Signature

Fee: No charge if included with Certificate of Dissolution. If filed separately, \$52.50.

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TALLAHASSEE FLORIDA