## A08000000163

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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D SCOTT JUN 1 8 2019



## FLORIDA DEPARTMENT OF STATE Division of Corporations

April 22, 2019

JONATHAN ROUIS 11 RAQUET CT NEWBURGH, NY 21550

SUBJECT: SALTZMAN INVESTMENTS, LTD.

Ref. Number: A08000000763

We have received your document for SALTZMAN INVESTMENTS, LTD; and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a GP, but your entity is a LP. Please complete and return the enclosed blank form(s).

There is a balance due of \$27.50.

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) 245-6051.

Dionne M Scott Regulatory Specialist II

Letter Number: 119A00008045

RECEIVED
JUN 0 7 2019

## **COVER LETTER**

TO: Registration Section

Tallahassee, FL 32301

Division of Corporations
SUBJECT: SALTEMAN FAYESTMENTS LTD  (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:
DONATURE ROMAS CIA
(Contact Person)
ZBT CA'S
(Firm/Company)
11 PACONET RD
(Address)
PACONET RD  (Firm/Company)  (Address)  New Barch Ny 2/550  (City, State and Zip Code)
NEWBARCH NY 2/550 (City, State and Zip Code)
(City, State and Zip Code)
For further information concerning this matter, please call:
Jouanne of Contact Person) at (845) 868 ST. T.  (Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
S52.50 Filing Fee S61.25 Filing Fee S105.00 Filing Fee S113.75 Filing Fee, and Certificate of Status Certified Copy Certificate of Status
STREET ADDRESS:  Registration Section  Division of Corporations  Clifton Building  2661 Executive Center Circle  MAILING ADDRESS:  Registration Section  Division of Corporations  P. O. Box 6327  Tallahassee, FL 32314

## CERTIFICATE OF DISSOLUTION FOR

SALTEMAN IN	1647 MEN 73	150			
(Name of Florida Limited Partnership	or Limited Liabilit	y Limited Partnership)	)		•
Pursuant to the provisions of section partnership or limited liability limited Florida Department of State on document number AO 800000 of Dissolution.	ted partnership.	, whose certificate	was filed wassigned Fl	ith the lorida	
FIRST: Reason for dissolution: (	State why partr	ership is submittin	ıg dissolutio	on)	
THE PARTICUSAGE HAS	Desocues	And Wender	g up a	75 B-150	tv:L
			7.	<u> </u>	
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SECOND: A Notice of Disso (Check box if a		ed.	יני היי די	7 A #	7
THIRD: Effective date, if other than the (Effective date cannot be prior to nor mor Department of State.)  Note: If the date inserted in this block does not be listed as the document's effective desired.	e than 90 days afters s not meet the app	er the date this docume licable statutory filing	requirements	the Florida	ill
Signatures of each general partner or the p	erson appointed p	ursuant to s. 620.1803(	(3) or (4), F.S	.:	
x fall Soffice	=	FREELER	SAUTZA	na <u>l</u>	
	_		<del></del>		
<u> </u>	_	<del></del>	<u>.,</u>		
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50				