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EXAMINER



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2011 JAN 10 PM 3: 52

COVER LETTER

TO: Registration Division of	Section Corporations				
	IING PARTNERS LIN			<u>-,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	
The enclosed Certif	icate of Dissolution ar	nd fee(s) are submitted	for filing.		
Please return all con	respondence concerni	ng this matter to:			
Charles L. Hoffman,					
	(Contact Person)				
Shell, Fleming, Davis	& Menge, P.A.			ಣೆಗ	2
	(Firm/Company)				=
226 Palafox Place, 9	th Floor			2 X	2011 JAN 10
2201 alalox 1 lace, 3	(Address)			25	_
	(0
Pensacola, FL 32502				(F)	PH
	(City, State and Zip Code)			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	ري
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For further information	tion concerning this m	atter, please call:		100	100
Charles L. Hoffman,	Ir., Esq.	at (850) 43	34-2411 ext. 103		
(Name of Contact Person)			Daytime Telephone	Number)	_
Enclosed is a check	for the following amo	ount:			
\$52.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	☐ \$105.00 Filing Fee and Certified Copy	\$113.75 Filin Certified Copy Certificate of S	, and	
STREET ADDRE	SS:	MAILING	ADDRESS:		
Registration Section		Registration Section			
Division of Corporations		Division of Corporations			
Clifton Building		P. O. Box 6327			
2661 Executive Center Circle		Tallahassee, FL 32314			

Tallahassee, FL 32301

CERTIFICATE OF DISSOLUTION FOR

RUSHING PARTNERS LIMITED	PARTNERS	HIP	
(Name of Florida Limited P	artnership or Lim	ited Liability Limited Partn	ership)
Pursuant to the provisions of section partnership or limited liability limit Florida Department of State on 12/document number A08000001021 Dissolution.	ed partnership 10/2008	, whose certificate was	filed with the gned Florida
FIRST: Reason for dissolution: (S	State why parti	nership is submitting di	ssolution)
By consent of the general partner and	the limited parti	ners.	
	, 4 - 44		A
SECOND: A Notice of Disso		hed.	O PM 3:
(Check box if attached.) THIRD: Effective date, if other than the date of filling: January 6, 2011			
(Effective date cannot be prior to nor more Department of State.)			; filed by the Florida
Signatures of each general partner of s. 620.1803(3) or (4), F.S.:	or the person a	ppointed pursuant to	
DCE Proposities VIO	_		
Its Manager	_		
Filing Fee:	\$52.50 \$52.50		
Certified Copy (optional): Certificate of Status (optional):	\$8.75		