

A09000000233

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600237098886

07/03/12--01027--003 **160.00

FILED
2012 JUL -3 AM 10:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. BRYAN

JUL -6 2012

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SCOTT CARVER IIA, LIMITED PARTNERSHIP
(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:

ANNE E. WALKER

(Contact Person)

MCCORMACK BARON SALAZAR, INC.

(Firm/Company)

720 OLIVE STREET, SUITE 2500

(Address)

ST. LOUIS, MO 63101-2313

(City, State and Zip Code)

FILED
2012 JUL -3 AM 10:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

ANNE WALKER

(Name of Contact Person)

at (314) 335-2946

(Area Code and Daytime Telephone 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 Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

**CERTIFICATE OF DISSOLUTION
FOR**

SCOTT CARVER IIA, 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 APRIL 7, 2009, assigned Florida document number A09000000233, hereby submits this Certificate of Dissolution.

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

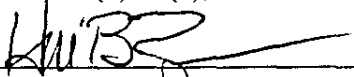
THE LIMITED PARTNERSHIP HAS CEASED DOING BUSINESS.

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.:



MBS SCOTT CARVER GP, LLC
By: Hillary B. Zimmerman,
Vice President of its Sole Member

 Mgr.

RELIANCE-SCOTT CARVER, LLC
By: Robert O. Jackson, Manager

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

FILED
2012 JUL -3 AM 10:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**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:

SCOTT CARVER IIA, LIMITED PARTNERSHIP

Description of information that must be included in a claim:

2012 JUL -3 AM 10:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

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

SCOTT CARVER IIA, LIMITED PARTNERSHIP

C/O McCORMACK BARON SALAZAR, INC.

720 OLIVE STREET, SUITE 2500, ST. LOUIS, MO 63101


C/O HILLARY B. ZIMMERMAN

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:

HILLARY B. ZIMMERMAN

Printed Name


Signature

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