A09000000784

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B. BOSTICK
FEB 21 2013
EXAMPLE.

COVER LETTER

WEH/DEA LP

STREET ADDRESS:		MAILING ADDRESS:			
☑ \$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		
Enclosed is a check	k for the following amo	ount:	iii A	2	
(Name of Co	ntact Person)	(Area Code and D	aytime Telephone Number)	PH 12: 12	
SHARON ROSEL		at (<u>301</u>) 495	5-1520, EXT. 235		و د ا پاهمان گون وز د
For further informa	ation concerning this m	atter, please call:	60 ·	20	
	(City, State and Zip Code)		Fig. 7. Sept. 1. Sept	13 FEB	3 5
SILVER SPRING, I			TĂLI	<u></u>	
	(Address)				
2900 LINDEN LAN	E, SUITE 300				
	(Firm/Company)				
WEH/DEA LP	•				
WARREN E. HALL	(Contact Person)				
MADDENE HALL	_				
Please return all co	orrespondence concerni	ng this matter to:			
The enclosed Certi	ficate of Dissolution ar	nd fee(s) are submitted	for filing.		
SUBJECT: WE	of Florida Limited Partnersh	ip or Limited Liability Lim	ited Partnership)	_	÷
	•				
Division of	n Section Corporations				

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

CERTIFICATE OF DISSOLUTION FOR

WEH/DEA LP			
(Name of Florida Limited Page 1977)	artnership or Li	mited Liability Limited Partne	ership)
Pursuant to the provisions of section partnership or limited liability limit Florida Department of State on Nov document number A09000000784 Dissolution.	ed partnershi vember 12, 20	ip, whose certificate was 09, assig	filed with the gned Florida
FIRST: Reason for dissolution: (S	State why par	tnership is submitting dis	ssolution)
All assets sold.			
			13 ALL:
			20
SECOND: A Notice of Disso (Check box if atta		ched.	PHI2:
THIRD: Effective date, if other than the date of filing:			12 RIDA
(Effective date cannot be prior to nor more Department of State.)	e than 90 days a	ifier the date this document is	filed by the Florida
Signatures of each general partner of s. 620.1803(3) or (4), F.S.:	or the person		
		WEH FLORIDA A GENERAL PARTI	ssociates,Inc. Ver
	_	BY: STEPHEN N	I. FLEISCHMAN
	_		DENT
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75		