

A09000000870

(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:

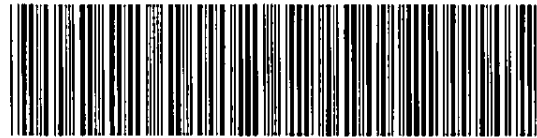
wrong form

AM 9:28

2017 OCT 10

Office Use Only

11:00:00



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11/16/17--01007--001 **17.50

10/11/17--01019--005 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
17 NOV 13 PM 1:56

M. MILLIGAN

NOV 16 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 12, 2017

KERKERING BARBERIO & CO.
ATTN: ANN HARMAN
1990 MAIN STREET, STE 801
SARASOTA, FL 34236

SUBJECT: RMA ASSET MANAGEMENT, LTD.
Ref. Number: A09000000870

We have received your document for RMA ASSET MANAGEMENT, LTD. and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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

There is a balance due of \$17.50.

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.

Michelle Milligan
Senior Section Administrator

Letter Number: 317A00020661

2017 NOV 13 AM 8:16

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 -Tallahassee, Florida 32314

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: RMA Asset Management 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:

Ann Harman

(Contact Person)

Kerkerin Barberio & Co.

(Firm/Company)

1990 Main Street, Ste 801

(Address)

SARASOTA FL 34236

(City, State and Zip Code)

For further information concerning this matter, please call:

Reinhard Krafft

(Name of Contact Person)

at (011 49)

(Area Code)

176 12 99 88 22

(Daytime Telephone Number)

Enclosed is a check for the following amount:

Balance to the

☒ \$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

RECEIVED
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DIVISION OF CORPORATIONS
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**CERTIFICATE OF DISSOLUTION
FOR**

RMA Asset Management Ltd.

(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 Nov. 25 2009, assigned Florida document number A0900000870, hereby submits this Certificate of Dissolution.

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

SALE OF ASSETS

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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.:

[Signature] for RMA Manager Inc. _____
[Signature] as partner _____

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