## A0900000966

	(Requestor's Name)
•	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UF	P WAIT MAIL
· .	(Business Entity Name)
	(Document Number)
Eertified Copies	Certificates of Status
Special Instructions	s to Filing Officer:
•	

A. LUNT

AUG -4 2010

**EXAMINER** 

Office Use Only

600182814636

08/05/10--01001--001 \*\*27.50

07/06/10--01019--021 \*\*25.00

2010 AUG -3 PM 3: 24
SECRETARY OF STATE
TALLAHASSEF, FIGHTE



July 9, 2010

JANET D. ALLENBY 6290 LINTON BLVD. STE 204 DELRAY BEACH, FL 33484

SUBJECT: JDATA LTD

Ref. Number: A09000000966

We have received your document for JDATA 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):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6094.

Agnes Lunt Regulatory Specialist II

Letter Number: 510A00016777

## COVER LETTER

TO: Registration Section Division of Corporations			•
SUBJECT: SDATA 14d (Name of Florida Limited Partnership or leading)	Limited Liability Limited Partnership)		-
The enclosed Certificate of Dissolution and fee	e(s) are submitted for filing.		
Please return all correspondence concerning th	is matter to:	•	
Janet D. Allenby (Contact Person)  1DATA Ltd. (Firm/Company)		ALC	2018 1
Delray Beach FL 33	1., 5tc 204 3484	HE JARY OF ST WHASSEE, FLO	1 AUG -3 PH 3:
City, State and Zip Code)  For-further information concerning this matter.	, please call:	A A	24
(Name of Contact Person)	(Area Code and Daytime Telepho	ne Number)	
	\$105.00 Filing Fee S113.75 Find Certified Copy Certified Copy	py, and	• •
Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassec, FL 32301	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314		

## CERTIFICATE OF DISSOLUTION FOR

	ATACT	Ltd.	-•						
(Name of I	lorida Limited P	artnership or	Limited	Liabil	ity Limi	ted Part	nership)		
Pursuant to the provi partnership or limited Florida Department of document number A Dissolution.	I liability limit of State on	ed partners	hip, wh 1009	ose	certific	ate wa , ass	s filed v igned f	with the Florida	2
FIRST: Reason for	dissolution: (S	•	1	hip is	s subm	itting c	lissolut	ion A	DIS AUG
	onger s	<u>Cirig</u> O					+ .	ASSEE	_₽
	•				* : #* *	-			 
					•				24
(Ch	Notice of Dissoneck box if atta	iched.)		•	1				
THIRD: Effective date, (Effective date cannot be Department of State.)			•	he dat	e this do	. · cument	is filed b	y the Flori	-· da
Signatures of each go 6. 620 1803(3) or (4)		or the perso	on appo	inted	l pursua	ant to			
									<u>.                                    </u>
Filing Fee: Certified Copy (opt		\$52.50 \$52.50 \$8.75	-			_	-		<del></del>