

#A11000000077

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

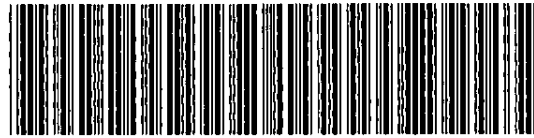
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



100208136881

06/02/11--01003--003 \*\*61.25

FILED  
11 MAY 31 AM 11:16  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

K. SALY  
EXAMINER  
JUN 2 2011

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** DARKSTAR PARTNERS, LP  
(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

The enclosed Statement of Termination and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

LEAH PARISIAN  
(Contact Person)

DARKSTAR LEADS, LLC  
(Firm/Company)

3099 WINDWARD LANE  
(Address)

LAKE WORTH, FL 33462  
(City, State and Zip Code)

For further information concerning this matter, please call:

ALEX SHOGREN at (561) 676 2080  
(Name of Contact Person) (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

STATEMENT OF TERMINATION  
FOR

FILED

11 MAY 31 AM 11:16

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DARKSTAR PARTNERS LP

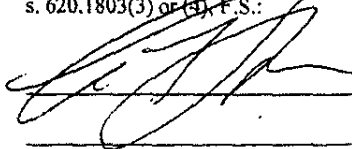
(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

A11000000077

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 JANUARY 24, 2011, hereby submits this Statement of Termination.

The limited partnership or limited liability limited partnership has completed winding up its affairs and wishes to file a statement of termination.

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



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