

# All 000000162

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

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

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

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

☐

PICK-UP

☐

WAIT

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MAIL

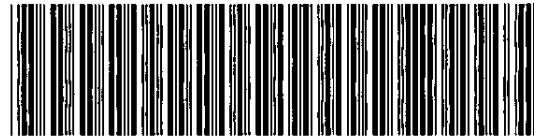
\_\_\_\_\_  
(Business Entity Name)

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

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

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2014 SEP 24 PM 3:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

OCT 16 2014

CLERK



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 24, 2014

JOSE RODRIGUEZ  
541 W. MANCHESTER BLVD #205  
INGLEWOOD, CA 90301

SUBJECT: TERY ENTERPRISES, L.P.  
Ref. Number: A11000000162

We have received your document for TERY ENTERPRISES, L.P. and your check(s) totaling \$35.00. 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.

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.

Tammi Cline  
Regulatory Specialist II

Letter Number: 314A00020525

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RECEIVED  
TALLAHASSEE, FLORIDA  
DIVISION OF CORPORATIONS

FILED

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: TERY ENTERPRISES, L.P.  
(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:

JOSE LUIS RODRIGUEZ

(Contact Person)

(Firm/Company)

541 W. MANCHESTER BLVD # 205

(Address)

INGLEWOOD- CA 90301

(City, State and Zip Code)

2014 SEP 24 PM 3:12  
SECRETARY OF STATE  
TALLAHASSEE, FL 32301

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For further information concerning this matter, please call:

JOSE LUIS RODRIGUEZ at ( 310 ) 419-0947

(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

**CERTIFICATE OF DISSOLUTION  
FOR**

TERY ENTERPRISES, L.P.

(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 02/24/2011, assigned Florida document number A11000000162, hereby submits this Certificate of Dissolution.

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

PARTNERSHIP DISSOLVED

PARTNERSHIP HAS NO BUSINESS PURPOSE

PARTNERSHIP HAS NO ACTIVITY WHATSOEVER

**SECOND:** ☐ A Notice of Dissolution is attached.  
(Check box if attached.)

**THIRD:** Effective date, if other than the date of filing: 9/30/14

(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.:

Jose L. Rodriguez  
JOSE LUIS RODRIGUEZ

Theresa Calhoun  
THERESA CALHOUN

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

**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:

TERY ENTERPRISES, L.P.

Description of information that must be included in a claim:

PARTNERSHIP DISSOLVED

PARTNERSHIP HAS NO BUSINESS PURPOSE

PARTNERSHIP HAS NO ACTIVITY WHATSOEVER

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

544 W. MANCHESTER BLVD #205

INGLEWOOD CA 90301

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:

JOSE LOUIS RODRIGUEZ

Printed Name

Jose Luis Rodriguez

Signature

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

2014 SEP 24 PM 3:12  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED