A 11007

(Re	questor's Name)				
(Address)					
(Ad	dress)				
(Cit	y/State/Zip/Phone	e #)			
PICK-UP	WAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	_ Certificates	s of Status			
Special Instructions to Filing Officer:					
		:			
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Office Use Only



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SLOWE SHOW TO DRIDE

16 APR -1 AH 9: 50

APR OF TOTAL

COVER LETTER

TO: Registration				
Division of	Corporations			
SUBJECT: FAN (Name o	TAR, LTD f Florida Limited Partnersh	ip or Limited Liability	y Limited Partnership)	
The enclosed Certif	ficate of Dissolution ar	nd fee(s) are submi	tted for filing.	
Please return all co	rrespondence concerni	ng this matter to:		
Joanne F. Andrews				
	(Contact Person)			
N.W. Florida Manage	ement Corp.			
,	(Firm/Company)			
7589 West Hwy 98				
,	(Address)			
Pensacola, FL 3250	£			
rensacoia, rt 3230	(City, State and Zip Code)			
	(en , , enne mie e.p eeus)			
For further informa	tion concerning this m	atter, please call:		
Joanne F. Andrews		at (850	456-6676	
(Name of Cor	tact Person)	(Area Code	and Daytime Telephone Number)	
Enclosed is a check	for the following amo	ount:		
☑ \$52.50 Filing Fee	☐ \$61.25 Filing Fee and Certificate of Status	\$105.00 Filing and Certified Copy		
STREET ADDRESS:		MAILI	NG ADDRESS:	
Registration Section		Registration Section		
Division of Corporations		Divisio	Division of Corporations	
Clifton Building			P. O. Box 6327	
2661 Executive Cer		Tallaha	ssee, FL 32314	
Tallahassee, FL 32	301			



March 17, 2016

JOANNE F ANDREWS NW FLORIDA MANAGEMENT CORP 7589 WEST HWY 98 PENSACOLA, FL 32506

SUBJECT: FANTAR, LTD. Ref. Number: A11007

We have received your document for FANTAR, LTD. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date must be specific and cannot be prior to the date of filing.

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.

Jenna D Harris Regulatory Specialist II

> 16 AP TALLA

Letter Number: 316A00005551

APR - 1 AM 9:50 UKSIASY OF STATE

CERTIFICATE OF DISSOLUTION FOR

FANTAR, LTD			
(Name of Florida Limited P	artnership or Limited	I Liability Limited Partner	ship)
Pursuant to the provisions of section partnership or limited liability limit Florida Department of State on Aug document number A11007 Dissolution.	ed partnership, w gust 18, 1981	hose certificate was fi	iled with the ned Florida
FIRST: Reason for dissolution: (S	State why partner	ship is submitting diss	solution)
The limited partnership holds no remai	ning assets. All as	sets have been sold and	l all debts paid.
December of 2015 all business activity	ceased and the re	maining limited partners	and General Partner
agreed to dissolve the limited partners	hip.		
SECOND: A Notice of Disso (Check box if atta		1.	
THIRD: Effective date, if other than the	date of filing: <u>date</u>	of filing	*
(Effective date cannot be prior to nor more Department of State.)	e than 90 days after i	the date this document is f	iled by the Florida
Signatures of each general partner of s. 620.1803(3) or (4), F.S.: MANY TORNIE FANNING ANDRE	•	ointed pursuant to	
JOANNE FANNING ANDRE	ω≤ 	•	
Filing Fee:	 \$52.50		25 18 18 18 18 18 18 18 18 18 18 18 18 18
Certified Copy (optional):	\$52.50		AR PR
Certificate of Status (optional):	\$8.75		
			9: O
			Sign Sign Sign Sign Sign Sign Sign Sign

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: Fantar, LTD Description of information that must be included in a claim: Include all recorded documents which is required, date of claim, nature of claim, parties of claim, dollar amount of claim and name, address and phone number of contact person. Mailing address where claims can be sent: (Claims cannot be sent to the Florida Department of State.) J.F. Andrews, P.O. Box 3280, Pensacola, FL 32516 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: rasse Farring (Indrews)
Signature Joanne Fanning Andrews, General Partner

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

Printed Name

State of Florida Department of State

I certify from the records of this office that FANTAR, LTD. is a Limited Partnership or Limited Liability Limited Partnership organized under the laws of the State of Florida, filed on August 18, 1981.

The document number of this Limited Partnership is A11007.

I further certify said Limited Partnership has paid all filing fees due this office through December 31, 2015, and its status is active.

Given under my hand and the Great Seal of the State of Florida at Tallahassee, the Capital, this the Fifth day of January, 2015



Secretary of State

Authentication ID: CC5831140634

To authenticate this certificate, visit the following site, enter this ID, and then follow the instructions displayed.

https://efile.sunbiz.org/certauthver.html