

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H140003020403)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ZIMMERMAN, KISER, & SUTCLIFFE, P.A.

Account Number: I19990000006

Phone : (407) 425-7010

Fax Number

: (407)425-2747

## DISS/TERM/CANCEL/REV OF LP/LLP GOLDENROD ROAD PARTNERS, LTD.

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$105.00

Electronic Filing Menu Corporate Filing Menu

Help

12/31/2014



## No. 5524 P. 2 (((H14000302040 3))) FILED 2014 DEC 31 PM 12: 26 FALLAHASSEE, FLORIOA

## CERTIFICATE OF DISSOLUTION FOR

Goldenrod Road Partners	Ltd.	
(Name of Florida Limited)	Partnership or Limited Liability Limited Partnership)	
partnership or limited liability limi Florida Department of State on Ap	on 620.1203, Florida Statutes, this Florida limited lited partnership, whose certificate was filed with the pril 18, 2012 assigned Florida hereby submits this Certificate of	
FIRST: Reason for dissolution: (State why partnership is submitting dissolution) The partnership is no longer in use.		
SECOND: A Notice of Diss (Check box If attr		
THIRD: Effective date, if other than the	date of filling: December 31, 2014	
(Effective date cannot be prior to nor mor Department of State )	re than 90 days after the date this document is filed by the Florida	
Signatures of each general partner s. 620.1803(3) or (4), F.S.:	or the person appointed pursuant to	
Assisted Living Foundation	of America, inc.	
By: Elliot Shelton		
President		
Filing Fee: Certified Copy (optional):	\$52.50 \$52.50	
Certificate of Status (optional):	\$8.75	