(Re	equestor's Name)			
(Ad	dress)			
(Ad	ldress)			
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## **COVER LETTER**

Division of (			
SUBJECT: B AN	D R RHODES LL	P	
(Name of	Florida Limited Partnersh	or Limited Liability Limited Partnersh	<b>ip</b> )
The enclosed Certifi	icate of Dissolution ar	fee(s) are submitted for filing.	
Please return all con	respondence concerni	g this matter to:	
CURTIS R. MOSLEY	, ESQ.	·	· 5
	(Contact Person)		APR-5
MOSLEY & WALLIS, I			カリ
	(Firm/Company)		ان
1221 E. NEW HAVEN	AVE		PH
	(Address)		Ŧ.
MELBOURNE, FL 32	901		7.4
(	City, State and Zip Code)		
For further informat	ion concerning this m	ter, please call:	
CURTIS R. MOSLEY		at (321) 984-3842	
(Name of Cont	act Person)	(Area Code and Daytime Telep	hone Number)
Enclosed is a check	for the following amo	nt:	
☐ \$52.50 Filing Fee	S61.25 Filing Fee and Certificate of Status	☑ \$105.00 Filing Fee S113.75 and Certified Copy Certificate	
STREET ADDRES	SS:	MAILING ADDRESS	
Registration Section		Registration Section	
Division of Corporations		Division of Corporations	
Clifton Building 2661 Executive Center Circle		P. O. Box 6327	
Tallahassee, FL 323		Tallahassee, FL 32314	

## CERTIFICATE OF DISSOLUTION FOR

teership or Lim	ited Liability Limited Partnership)
d partnership. RCH 14, 2013	orida Statutes, this Florida limited, whose certificate was filed with the assigned Florida seby submits this Certificate of
ate why partr	ership is submitting dissolution)
AL PARTNER	AND THE SOLE LIMITED PARTNER
w <u>-</u> .	
<del></del>	
ution is attach hed.)	ned.
te of filing:	·
han 90 days aft	er the date this document is filed by the Florida
the person a	opointed pursuant to
- Partuer -	William Rhodes, Limited ?
\$52.50	
\$\$2.50 \$8.75	
	620.1203, Fl d partnership, RCH 14, 2013  AL PARTNER  ation is attach thed.) the of filing: the person at Fartner  \$52.50 \$\$2.50

SECRETARY OF STATE