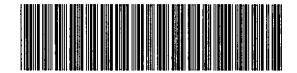
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| (Requestor's Name) | | | | | | | |
|---|--|--|--|--|--|--|--|
| (Address) | | | | | | | |
| (Address) | | | | | | | |
| (City/State/Zip/Phone #) | | | | | | | |
| PICK-UP WAIT MAIL | | | | | | | |
| (Business Entity Name) | | | | | | | |
| (Document Number) | | | | | | | |
| Certified Copies Certificates of Status | | | | | | | |
| Special Instructions to Filing Officer: | | | | | | | |
| | | | | | | | |
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Office Use Only



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FEB 1 3 2014

T. BROWN

THE**EASTON**GROUP

February 3, 2014

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: **EWE Goodyear Ltd.**

To Whom It May Concern:

I am submitting the attached Certificate of Dissolutions for the subject entity we formed back in December. Since this entity was formed in error and never used, is there any way to get the original fee (\$1,061.25) for forming this entity back?

I can be reached directly at 786-437-5806 or ltrivett@tneeastongroup.com with your answer and/or instructions on what I need to do to proceed with getting the original fee back.

Thanking you in advance for your assistance in this regard.

Sincerely

Lenette Trivett
Closing Coordinator

Enclosures

lt

COVER LETTER

| TO: | _ | | Section Corporations | | | | | | | |
|---|-------------------|----------|--|----------------------|---|-------|----------------------|----------|------|--|
| SUBJ | ECT: | EWE | Goodyear Ltd. | | | | | | | |
| | | Name o | f Florida Limited Partnersh | ip or Lim | ited Liabilit | y Li | mited Partnership |)) | | |
| The e | nclosed | d Certif | ficate of Dissolution an | d fee(s) | are subm | itted | l for filing. | | | |
| Please | e return | all co | rrespondence concerni | ng this n | natter to: | | | | | |
| Edw | vard | J. Ea | aston | | | | | | | |
| | | | (Contact Person) | | | - | | | | |
| The | Eas | ton (| Group | | | | | | | |
| | | | (Firm/Company) | | | - | | | | |
| 101 | 65 N | W 19 | Street | | | | | | | |
| | | | (Address) | | | - | | | | |
| Dor | al, | FL 3 | 33172 | | | | | | | |
| | . | | (City, State and Zip Code) | | - | - | | | | |
| For fu | ırther i | nforma | tion concerning this m | atter, plo | ease call: | | | | | |
| Len | ette | Triv | vett | at (| 305 |) | 593~2222 | Ext. | 806 | |
| | (Nam | e of Cor | ntact Person) | | (Area Code | and | Daytime Teleph | one Num | ber) | |
| Enclo | sed is a | a check | for the following amo | unt: | | | | | | |
| ⊠ \$52. | 50 Filin | g Fee | \$61.25 Filing Fee and Certificate of Status | | 05.00 Filing ertified Cop | | S113.75 Certified Co | opy, and | e, | |
| STRI | EET A | DDRE | SS: | | MAIL | INC | G ADDRESS: | | | |
| Registration Section | | | | Registration Section | | | | | | |
| Division of Corporations | | | | | Division of Corporations | | | | | |
| Clifton Building 2661 Executive Center Circle | | | | | P. O. Box 6327 Tallahassee, FL 32314 | | | | | |
| | Execut 1assee, | | | | i anana | 1556 | с, ГL 32314 | | | |

CERTIFICATE OF DISSOLUTION **FOR**

| F | 11 ~ |
|-----------|-------------------------------------|
| | "LED |
| SECRETARY | 2 AMII:52 COFSTATE E, FLORIDA |
| ip) | E, FI DATE |
| limited | ORIDA |

| EWE Goodyear Ltd | | TALLAH ARY |
|---|-------------------------------|---|
| (Name of Florida Limited P | artnership or Limit | ted Liability Limited Partnership) |
| Pursuant to the provisions of section partnership or limited liability limit Florida Department of State on document number A130000007 Dissolution. | ed partnership, v 12–11–13 | whose certificate was filed with the assigned Florida |
| FIRST: Reason for dissolution: (S | State why partne | ership is submitting dissolution) |
| Entity formed in erro | r - not ne | eded. |
| | | |
| | | |
| | | |
| | | |
| SECOND: A Notice of Disso (Check box if attack) | ched.) | ed. |
| THIRD: Effective date, if other than the c | late of filing: | |
| (Effective date cannot be prior to nor more Department of State.) | than 90 days after | r the date this document is filed by the Florida |
| Signatures of each general partner of s. 620.1803(3) or (4), F.S.: | or the person app | pointed pursuant to |
| Edward J. Easton | <u> </u> | |
| | <u> </u> | |
| Filing Fee: Certified Copy (optional): Certificate of Status (optional): | \$52.50 \$52.50 \$8.75 | |