

A 14000000055

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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FEB 08 2016
D CUSHING

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: BAMBRAL 10, L.P.
(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

DOCUMENT NUMBER: A 14000000055

The enclosed Statement of Dissociation and fec(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Aisha McKnight
(Contact Person)

Aspire Health, LLC
(Firm/Company)

1485 Livingston Lane
(Address)

Jackson, MS 39213
(City, State and Zip Code)

For further information concerning this matter, please call:

John Rocray at (601) 407-7981
(Name of Contact Person) (Area Code and Daytime Telephone Number)

\$52.50 Filing Fee \$105.00 Filing Fee and Certified Copy

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

TALLAHASSEE, FL
STATE OF FLORIDA
DIVISION OF CORPORATIONS
10 FEB 2009 10:03 AM
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FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 28, 2015

AISHA MCKNIGHT
ASPIRE HEALTH, LLC
1485 LIVINGSTON LANE
JACKSON, MS 39213

SUBJECT: BAMBRAL 10, L.P.
Ref. Number: A14000000055

We have received your document for BAMBRAL 10, L.P. and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have completed the wrong application. Please complete the attached form.

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) 245-6050.

Diane Cushing
Senior Section Administrator

Letter Number: 215A00026954

RECEIVED
16 FEB -4 PM 2:35
A faint circular stamp, likely a filing or processing mark, located below the date and time stamp.

**STATEMENT OF DISSOCIATION
FOR
GENERAL PARTNER
OF
LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP**

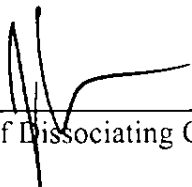
Pursuant to the provisions of section 620.1605, Florida Statutes, the undersigned general partner hereby dissociates from the following limited partnership or limited liability limited partnership:

1. The name of Limited Partnership or Limited Liability Limited Partnership is:

BAMBRAL 10, L.P.

2. The name of the dissociating general partner is:

Jason Rutland



Signature of Dissociating General Partner

Filing Fee: \$52.50
Certified Copy (optional): \$52.50

FILED
16 FEB 14 PM 3:33
CLERK OF COUNTY OF
HALL COUNTY, FLORIDA