

# A 14000000055

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP

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MAIL

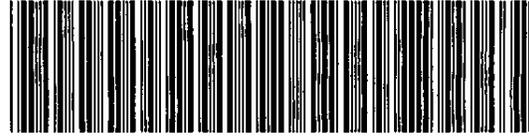
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D CUSHING

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Bambra110, L.P.  
(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

DOCUMENT NUMBER: A14000000055

The enclosed Statement of Dissociation and fee(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 Rouray 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

19 FEB 1 10 53 AM '06  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 28, 2015

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

SUBJECT: BAMBRAL10, L.P.  
Ref. Number: A14000000055

We have received your document for BAMBRAL10, 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: 915A00026950

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**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:

Bambrallo, L.P.

2. The name of the dissociating general partner is:

Nicole Hotard

*Nicole Hotard*

Signature of Dissociating General Partner

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

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