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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** BA-Lake land Associates, LTD  
(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

**DOCUMENT NUMBER:** A14752

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

Please return all correspondence concerning this matter to:

William H. Walton Jr  
(Contact Person)

\_\_\_\_\_  
(Firm/Company)

4000B St. Johns Avenue, Suite 22  
(Address)

Jacksonville, FL 32205  
(City, State and Zip Code)

For further information concerning this matter, please call:

W.H. Walton Jr at ( 904 ) 388-2225  
(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:**  
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Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

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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:

BA-Lakeland Associates, LTD

2. The name of the dissociating general partner is:

WWT Properties, Inc.

W. H. Wolcott  
Signature of Dissociating General Partner

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

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