## A15 000 000 089

(Requestor's Name)	
(Address)	500357056
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	01/04/2101016-
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	t. o
Special Instructions to Filing Officer:	

Office Use Only



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## FLORIDA DEPARTMENT OF STATE Division of Corporations

February 12, 2021

MARIA BANKEMPER 8388 S. TAMIAMI TR., UNIT 114 SARASOTA, FL 34238

SUBJECT: BANKEMPER FAMILY L.P.

Ref. Number: A15000000089

We have received your document and check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

A SIGNATURE FOR EACH GENERAL PARTNER IS REQUIRED. SEE THE PRINTOUT. PLEASE RESUMBIT.

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.

Letter Number: 821A00003171

Susan Tallent Regulatory Specialist II

www.sunbiz.org

## **COVER LETTER**

TO: Registration Section
Division of Corporations
Bankemper Family LP SUBJECT:
(Name of Florida Limited Partnership or Limited Liability Limited Partnership)
The enclosed Certificate of Dissolution and fee(s) are submitted for filing. Please return all correspondence concerning this matter to:  Maria Bankemper
(Contact Person)
(Firm/Company)
8388 S. Tamiami Tr., Unit 114
(Address)
Sarasota, Florida 34238
(City, State and Zip Code)
For further information concerning this matter, please call:
Maria Bankemper         941         9244901           at ()
(Name of Contact Person) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:
S52.50 Filing Fee S61.25 Filing Fee and Certificate of and Certificate of Status Status S105.00 Filing Fee S113.75 Filing Fee and Certified Copy Certificate of Status
STREET ADDRESS: MAILING ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

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

## CERTIFICATE OF DISSOLUTION FOR

Bankemper Family LP:		
(Name of Florida Limited Partnership of	or Limited Liability Limited Partnership)	<del></del>
•	on 620.1203, Florida Statutes, this Florida limited ted partnership, whose certificate was filed with the o/2015, assigned Florida, hereby submits this Certificate of	
FIRST: Reason for dissolution: (	State why partnership is submitting dissolution)	
Company does not have assets any longer	r and is dissolving the partnership.	
		<del></del>
		<u>1</u>
SECOND: A Notice of Disso	plution is attached.	<del>P</del> )
(Check box if	attached.)	PII 9: 5
WHILE THE TANK OF		<u>5.</u>
<b>THIRD:</b> Effective date, if other than it (Effective date cannot be prior to nor mor Department of State.)	te date of filing:	ida
	es not meet the applicable statutory filing requirements, this da date on the Department of State's records.	te will
Signatures of each general partner or the p	person appointed pursuant to s. 620 1803(3) or 4), F.S.:	
Maria Perlemper	1-Manager	- Manage
Maria Bankenger	Ed Bankemper	
Filing Fee:	\$52.50	
Certified Copy (optional):	\$52.50 \$52.50	
Certificate of Status (optional):	\$8.75	