

**A1600000134**  
Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : C T CORPORATION SYSTEM  
Account Number : FCA000000023  
Phone : (850) 205-8842  
Fax Number : (850) 878-5368

16 AUG 29 AM 8:53  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**DISS/TERM/CANCEL/REV OF LP/LLP  
AUTOTECH ANALYTICS, LP**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$52.50

2016 AUG 29 AM 11:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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AUG 30 2016  
J. HARRIS

COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Autotech Analytics, LP  
(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:

Elizabeth Hallett

(Contact Person)

Buchanan Ingersoll & Rooney PC

(Firm/Company)

409 North Second Street, Suite 500

(Address)

Harrisburg, PA 17101

(City, State and Zip Code)

For further information concerning this matter, please call:

Elizabeth Hallett

(Name of Contact Person)

at ( 717 ) 237-4974

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$52.50 Filing Fee

☒ \$61.25 Filing Fee  
and Certificate of  
Status

☐ \$105.00 Filing Fee  
and Certified Copy

☐ \$113.75 Filing Fee,  
Certified Copy, and  
Certificate of Status

**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

Aug. 22. 2016 11:43AM hollershead auto sales

No. 0298 P. 2

**CERTIFICATE OF DISSOLUTION  
FOR**

AUTOTECH ANALYTICS, LP

(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

Pursuant to the provisions of section 620.1203, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose certificate was filed with the Florida Department of State on 3/9/2016, assigned Florida document number A16000000134, hereby submits this Certificate of Dissolution.

**FIRST: Reason for dissolution:** (State why partnership is submitting dissolution)

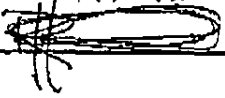
Ninety days have passed and no limited partners have been admitted. Partnership never commenced business.

**SECOND:** ☐ A Notice of Dissolution is attached.  
(Check box if attached.)

**THIRD: Effective date, if other than the date of filing:** \_\_\_\_\_

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.:

  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Filing Fee: \$52.50  
Certified Copy (optional): \$52.50  
Certificate of Status (optional): \$8.75

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