

# A17112

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

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

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

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

☐ PICK-UP

☐ WAIT

☐ MAIL

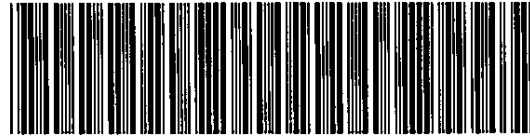
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

MAR -6 2014

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** HARBOUR TOWN OF JACARANDA, LTD.  
(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

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

Please return all correspondence concerning this matter to:

Debi T. Wilson

(Contact Person)

Butler Properties

(Firm/Company)

2727 Paces Ferry Road, Suite 1-255

(Address)

Atlanta, Georgia 30339

(City, State and Zip Code)

For further information concerning this matter, please call:

Debi T. Wilson

(Name of Contact Person)

at ( 770 ) 433-9500 x11

(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

HARBOUR TOWN OF JACARANDA, LTD.

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SECRETARY OF STATE  
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