A17199	• •
(Requestor's Name) (Address) (Address)	600074318896
(City/State/Zip/Phone #)	0 5/11/0601004012 ** 52.50
Certified Copies Certificates of Status	DIVISION OF CORPORATIONS
Office Use Only	

V.

J. BRYAN MAY 1 8 2006

COVER LETTER

TO: **Registration Section Division of Corporations**

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WWH Realty Investors IV, LID SUBJECT: (Name of Florida Limited Partnership or Limited Liability Limited Partnership)

DOCUMENT NUMBER: A 17199

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

Please return all correspondence concerning this matter to:

(Contact Person)	DIVISION OF
(Firm/Company)	
HODOB StaTohns Avenue, Suite 22	PH
(Address)	Nº AA
Jacksonville FL 32205	LIB OHS
(City, State and Zip Code)	

For further information concerning this matter, please call:



\$105.00 Filing Fee and Certified Copy.

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STREET ADDRESS:

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

\$52.50 Filing Fee

MAILING ADDRESS: **Registration Section Division of Corporations** P. O. Box 6327 Tallahassee, FL 32314

CR2E118 (01/06)

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:

Kalt Jhuest \mathcal{D}_{-} .

2. The name of the dissociating general partner is:

roperties WWH Snc

Signature of Dissociating Partner

1.2

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

FILED SECRETARY OF STATE OF MAY 1 1 PM 12: 48