A19428

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(Requestor's Name)	_
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(Address)	
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	_
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	_
(Booding Wallisof)	
Certified Copies Certificates of Status	-
Special Instructions to Filing Officer:	٦
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SECRETARY OF STATE
SECRETARY OF STATE

N. Ontern JUL - 7 2010

COVER LETTER

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TO: Registration Division of	1 Section Corporations			
SUBJECT: W.A	.M. Ltd			
(Name o	f Florida Limited Partnersh	ip or Limited Liabi	lity Limited Partnership)	
The enclosed Certi	ficate of Dissolution an	nd fee(s) are sub	mitted for filing.	
Please return all co	rrespondence concerni	ng this matter to	:	
			i.	
John Michael Bodna			· I	
10 mg	(Contact Person)			
Bodnar Investment C			<u></u>	
	(Firm/Company)			
3755 Corporate Woo	ods Drive			
	(Address)		1 1	
Birmingham, AL 352	242			
	(City, State and Zip Code)		·	
For further informa	ntion concerning this m	atter, please cal	l :	
Ryan Simms		at (205) 451-1872	
(Name of Co	ntact Person)		de and Daytime Telephone Number)	
Enclosed is a check	c for the following amo	ount:		
☑ \$52.50 Filing Fee	☐ \$61.25 Filing Fee and Certificate of Status	\$105.00 Filing and Certified C		
STREET ADDRE	CSS:	MAI	LING ADDRESS:	
Registration Section		Registration Section		
Division of Corporations		Division of Corporations		
Clifton Building 2661 Executive Center Circle		P. O. Box 6327 Tallahassee, FL 32314		
Tallahassee, FL 32		ı ana	(

CERTIFICATE OF DISSOLUTION FOR

FILED

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

W.A.M. Ltd			ALLAHASSE
(Name of Florida Limited Pa	rtnership or Limite	ed Liability Limite	ed Partnership)
Pursuant to the provisions of section partnership or limited liability limited Florida Department of State on June document number A 19428 Dissolution.	ed partnership, v e 17, 216 2 • 10	whose certificat	te was filed with the _, assigned Florida
FIRST: Reason for dissolution: (S	tate why partne	rship is submit	ting dissolution)
The property that was in Miami under V	V.A.M. Ltd Partne	ership was sold.	
			•
		······································	
SECOND: A Notice of Disso (Check box if attack)		ċd.	i.
THIRD: Effective date, if other than the	late of filing:		· · · · · · · · · · · · · · · · · · ·
(Effective date cannot be prior to nor more Department of State.)	than 90 days after	the date this doci	ment is filed by the Florida
Signatures of each general partner of s. 620.1803 (3) (4), F.S.:	r the person app	pointed pursuar	nt to
Much	_		
	· · · · · · · · · · · · · · · · · · ·	:	i
		·	
Filing Fee:	\$52.50		ı
Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$8.75		