A21039

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
WRONG FORM
Office Use Only



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December 11, 2018

STEPHEN FEIGENBAUM 10 REVTEN DR CLOSTER, NJ 07624

SUBJECT: LEEDS ASSOCIATES LTD

Ref. Number: A21039

We have received your document for LEEDS ASSOCIATES LTD and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a LLC, but your entity is a LIMITED PARTNERSHIP. Please complete and return the enclosed blank form(s).

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) 245-6051.

Letter Number: 518A00025405

Karen A Saly Regulatory Specialist II

www.sunbiz.org

Division DO POV 6227 Tollahassaa Florida 32314

COVER LETTER

TO: Registration Section	
Division of Corporations	
SUBJECT: LUROS (Name of Florida Limited)	Partnership or Limited Liability Limited Partnership)
The enclosed Certificate of Dissolution Please return all correspondence concerning for the first firs	
	imvCompany)
	ten Dave
Chosen (City, St	Address) New June 07624 ate and Zip Code)
For further information concerning th	is matter, please call:
STUPLIN PERCENDAUM (Name of Contact Person)	at (<u>201</u>) <u>184-4480</u> (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following	amount:
S52.50 Filing Fee S61.25 Filing Fe and Certificate of Status	
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Tallahassee, FL 32301

CERTIFICATE OF DISSOLUTION FOR

	"-8 Ai
Leeds ASSOCIATION III	
(Name of Florida Limited Partnership or Limited Liability Limited Partnership)	ing.
	1.57
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 0.7.1.1985, assigned Florida document number 121039, hereby submits this Certificate of Dissolution.	:
FIRST: Reason for dissolution: (State why partnership is submitting dissolution)	
COMPany 15 No longer Archive	
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 Flo Department of State.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this d not be listed as the document's effective date on the Department of State's records.	
Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4) F.S.: MYRNA Collen General Partner Myrna Colle Sriphen Fingenthouse to Ather Jugentium W. No Down Affr. 2	~ X
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	