## A21708

(Requestor's Name)					
(Address)					
,					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
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(Business Entity Name)					
(Document Number)					
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Special Instructions to Filing Officer:					
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12/31/07--01008--017 \*\*113.75

OB JAN 22 PH 1:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

JAN 22 2008

**EXAMINER** 

## COVER LETTER

TO: Registration Division of C				
SUBJECT: Name of	RAHN / ALEX Florida Limited Partnersh	ANURIA LTD	ited Partnership)	_
The enclosed Certifi	cate of Dissolution ar	nd fee(s) are submitted	for filing.	
Please return all cor	respondence concerni	ng this matter to:		
Robe	(Contact Person)	ink	* <sub>r</sub>	
(Firm/Company)  1222) NW 7 DRIVE  (Address)  CORAL TORINGS, FL 33071  (City, State and Zip Code)			08 JAN 22 SECRETAR TALLAHASS	
	City, State and Zip Code)		PH 1:57  OF STATE SEE, FLORIDA	
	2+ixk	at ( 954 ) 7	53-0785 aytime Telephone Number)	-
Enclosed is a check	for the following amo	ount:		
□\$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		



January 2, 2008

ROBERT J. STIRK 12221 NW 7TH DRIVE CORAL SPRINGS, FL 33071

SUBJECT: RAHN/ALEXANDRIA, LTD.

Ref. Number: A21708

We have received your document for RAHN/ALEXANDRIA, LTD. and your check(s) totaling \$113.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6984.

Deborah Bruce Regulatory Specialist II

Letter Number: 708A00000129



## CERTIFICATE OF DISSOLUTION FOR

RAHNILAI	EXANDR	ia ITD.	
(Name of Florida Limited P	artnership or Lim	ited Liability Limited Par	tnership)
Pursuant to the provisions of section partnership or limited liability limited Florida Department of State on Certificate of Dissolution.	ted partnership	, whose certificate wa	s filed with the
FIRST: Reason for dissolution: (S	State why partr	nership is submitting o	dissolution)
All assets sold	- busir	ess closing e	fective
12-31-07		0	יע 
•			
SECOND: A Notice of Dissol (Check box if attack)		ed.	; 
THIRD: Effective date, if other than the	date of filing:	12-31-1	on Ex &
(Effective date cannot be prior to nor more Department of State.)	e than 90 days aft	er the date this document	is filed by REFlorida
Signatures of each general partner of s. 620.1803(3) or (4), F.S.:	or the person ap	opointed pursuant to	PH ::
Polent & Stike	_	· .	57
<u> </u>	<del></del>		
Filing Fee:	 \$52.50	<del> </del>	
Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75		