A22102

(Re	questor's Name)	
(Ad	dress)	
· (Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	ocument Number)
Certified Copies	Certificate	s of Status
Special Instructions to	Filing Officer:	
		:

Office Use Only



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SECRETARY OF STATE

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COVER LETTER

	tegistration S Division of C				
SUBJECT: Hollywood Mobile Estates Limited (Name of Florida Limited Partnership or Limited Liability Limited Partnership)					
The enclosed Notice of Dissolution and fee(s) are submitted for filing.					
Please re	turn all corr	espondence concernin	g this matter to:		
Mark I	R. Hause				
(Contact Person)					
Maddin Hauser Roth & Heller, PC					
		(Firm/Company)	_		
РО В	ox 215				
		(Address)			
Southfield, MI 48037-0215					
	((City, State and Zip Code)			
For further information concerning this matter, please call:					
Catherine Bruning		at (_248)	827-1860		
	(Name of C	ontact Person)	(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			

NOTICE OF DISSOLUTION FOR FLORIDA LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

This notice is submitted by the dissolved limited partnership or limited liability limited partnership named below or the successor entity for resolution of payment of unknown claims against this limited partnership or limited liability limited partnership as provided in s. 620.1807, F.S.

This "Notice of Dissolution" is optional and is not required when filing a Certificate of Dissolution. Name of Dissolved Limited Partnership or Limited Liability Limited Partnership: Hollywood Mobile Estates Limited Description of information that must be included in a claim: Invoice and description of work performed or services rendered. Mailing address where claims can be sent: (Claims cannot be sent to the Florida Department of State) Lautrec, Ltd. 31550 Northwestern Highway, Suite 200 Farmington Hills, MI 48334 A claim against the above named limited partnership or limited liability limited partnership will be barred unless a proceeding to enforce the claim is commenced. Within 4 years after the filing of notice. Signature of a general partner or a principal of the successor entity; Spencer M. Partrich Signature Printed Name Filing Fee: \$52.50

\$52.50

Certified Copy (optional):