A24489

(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:

L. SELLERS

MAY 14 2008

EXAMINER

Office Use Only



200128921292

05/12/08--01032--019: ++52.50

SECRETARY OF STATE

COVER LETTER

TO:	Registration Division of (
SUBJE	CT: TYR	ONE HOOTERS	, LTD.		
		Florida Limited Partnersh	ip or Limited Liabilit	y Limite	d Partnership)
The en	closed Certifi	cate of Dissolution an	d fee(s) are subm	itted fo	r filing.
Please	return all cor	respondence concerni	ng this matter to:		
TINA	WAGER	S			
		(Contact Person)	000004710	. K. I	
HOO	TERS MA	NAGEMENT C	ORPORATIO	N.	
		(Firm/Company)			
107 1	HAMPTO	N ROAD, SUITE	200		
		(Address)			
CLE	ARWATE	R, FL 33759		_	
		(City, State and Zip Code)			
For fur	ther informat	ion concerning this m	atter, please call:		
Tina Wagers			at (_727	,725	-2551, EXT. 5575
	(Name of Cont	act Person)	(Area Code	/	ytime Telephone Number)
Enclose	ed is a check	for the following amo	unt:		
☑ \$52.50	0 Filing Fee	\$61.25 Filing Fee and Certificate of Status	\$105.00 Filing and Certified Cop		☐ \$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		

CERTIFICATE OF DISSOLUTION FOR

TYRONE HOOTERS, LTD	D .		
(Name of Florida Limited P	artnership or Lin	nited Liability Limited Partnership)	
Pursuant to the provisions of section partnership or limited liability limit Florida Department of State on Certificate of Dissolution.	ed partnership	, whose certificate was filed with	the
FIRST: Reason for dissolution: (S	State why part	nership is submitting dissolution)	
Partnership had a 20-year	term per th	e terms of the Partnership	Agreement.
			
•			·
SECOND: A Notice of Dissol (Check box if attack)		ned.	
THIRD: Effective date, if other than the	date of filing:	upon filing	·
(Effective date cannot be prior to nor more Department of State.)	e than 90 days aj	ter the date this document is filed by the l	Florida
Signatures of each general partner os. 620.1803(3) or (4), F.S.:	or the person a	appointed pursuant to	
	_	TYRONE HOOTERS, LITO.	
	_	by	
		Bruce W. Clark, CFO Hooters III, Inc., Gene	eral Partner
Filing Fee:	\$52.50	•	
Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$8.75	man and a second	2
		خيز	

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:

TYRONE HOOTERS, LTD.
Description of information that must be included in a claim:
Name, address, reason for claim, amount of claim, contact person
Mailing address where claims can be sent: (Claims cannot be sent to the Florida Department of State.)
Bruce Clark, CFO
c/o Hooters Management Corporation
107 Hampton Road, Suite 200
Clearwater, FL 33759
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 the notice.

Signature of a general partner or a principal of the successor er

Bruce W. Clark, CFO, Hooters III, General Partner

Printed Name

Fee: No charge if included with Certificate of Dissolution. If filed separatel \$52.50.