A 29875

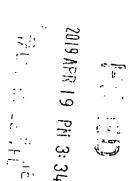
(Requestor's Name)			
(Address)			
(Ac	ldress)		
(Cit	ty/State/Zip/Phone	e #)	
PICK-UP	☐ WAIT	MAIL	
(Business Entity Name)			
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			

Office Use Only



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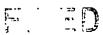
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COVER LETTER

TO: Registration Section		
Division of Corporations		
SUBJECT: WILLOW KEY ASSOCIATED		
(Name of Florida Limited Pa	artnership or Limited Liability Limited Partnership)	
The enclosed Certificate of Dissolution Please return all correspondence concert JAN HEFLINGER	and fee(s) are submitted for filing. ning this matter to:	
(Cont.	act Person)	
WILLOW KEY ASSOCIATES LIMITED PAR	TNERSHIP	
(Firm	/Company)	
247 N WESTMONTE DR		
(Ad	dress)	
ALTAMONTE SPRINGS, FL		
(City, State	and Zip Code)	
For further information concerning this i	matter, please call:	
JAN HEFLINGER	407 772-0200 at ()	
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)	
Enclosed is a check for the following am	nount:	
S52.50 Filing Fee S61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee, and Certified Copy Certified Copy, and Certificate of Status	
STREET ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations Clifton Building	Division of Corporations P. O. Box 6327	
2661 Executive Center Circle	Tallahassee, FL 32314	

Tallahassee, FL 32301

CERTIFICATE OF DISSOLUTION FOR



WILLOW KEY ASSOCIATED LIMITE	D PARTNERSHIP	2019 APR 19 PH 3: 34
(Name of Florida Limited Partnership of	or Limited Liability Lin	nited Partnership)
Dissolution.	ted partnership, who RIL 04, 1990 , hereby s	ose certificate was filed with the, assigned Florida submits this Certificate of
FIRST: Reason for dissolution: (State why partnersh	ip is submitting dissolution)
NO LONGER CONDUCTING	BUSINESS	
		3-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
SECOND: A Notice of Disso (Check box if a		
Department of State.)	e than 90 days after the es not meet the applicab	e date this document is filed by the Florida le statutory filing requirements, this date will of State's records.
Signatures of each general partner or the p	person appointed pursua	ant to s. 620.1803(3) or (4), F.S.:
Filing Fee:	\$52.50	
Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$8.75	