H 30182

1		
(Re	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL MAIL
(Bus	siness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status

Special Instructions to Filing Officer:



300092603473

03/19/07--01006--025 **61.25

OT MAR 19 PM 1: 04
SECRETARY OF STATE
SECRETARY OF STATE

Office Use Only

COVER LETTER

TO: Registration Division of C					
	PARTNERS, LT Florida Limited Partnersh		Limited Pa	artnership)	
The enclosed Certif	icate of Dissolution an	id fee(s) are submit	ted for fi	ling.	
Please return all cor	respondence concerni	ng this matter to:			
JEFFREY A. E	BERNSTEIN, ES	Q.			
	(Contact Person)				
BERNSTEIN 8	BERGER, P.A.				
	(Firm/Company)				
100 N. BISCA	YNE BLVD., SUI	ITE 1001			2
	(Address)				路盖机
MIAMI, FL 33	132				超 10 世
	(City, State and Zip Code)				SOFE P
					Mag 3
For further informat	ion concerning this m	atter, please call:			OT MAR 19 PM 1: 04 SECRETARISEE FLORITO
JEFFREY A. B	ERNSTEIN, ESC	Q. _{at} (305	371-4	555	Ďm -
(Name of Cont	tact Person)	(Area Code a	nd Daytim	e Telephone Numl	per)
Enclosed is a check	for the following amo	unt:			
\$52.50 Filing Fee	✓ \$61.25 Filing Fee and Certificate of Status	\$105.00 Filing F and Certified Copy	Cer	\$113.75 Filing Fee rtified Copy, and rtificate of Status	
STREET ADDRES	SS:	MAILI	NG ADD	RESS:	
		ation Section			
· ·		of Corpo	orations		
Clifton Building P. O. Box					
2661 Executive Cen		Tallahas	see, FL	32314	
Tallahassee, FL 323	301				

CERTIFICATE OF DISSOLUTION FOR

HBS PARTNERS, LTD	
(Name of Florida Limited Partnership or Limited Liability Limited Partnership)	
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 06/12/1990 , hereby submits this Certificate of Dissolution.	
FIRST: Reason for dissolution: (State why partnership is submitting dissolution)	
NO LONGER CONDUCTING BUSINESS	
SECOND: A Notice of Dissolution is attached. (Check box if attached.)	OT MAR 19 PH 1: OH SECRETARISEE, FLORIS
THIRD: Effective date, if other than the date of filing:	題った
(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)	FLOR ST
Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.:	AREA LI
BERTRAM J. GOLDSMITH JR.	
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75	