

A30255

(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:

Linda CAV  
AUTHORIZATION BY PHONE TO  
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DATE 1/10/11  
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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATION  
11 JAN -6 AM 11:10

N. C. C. C. C. JAN 10 2011

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** Collier Place II, Ltd.

(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

The enclosed Certificate of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Sandra Mahoney

(Contact Person)

Collier Enterprises Management, Inc.

(Firm/Company)

3003 Tamiami Trail North, Suite 400

(Address)

Naples, FL 34103

(City, State and Zip Code)

For further information concerning this matter, please call:

Linda Cannarsa

(Name of Contact Person)

at ( 239 )

261-4455

(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

**CERTIFICATE OF DISSOLUTION  
FOR**

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 JAN -6 AM 11:10

Collier Place II, 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 6/25/90, assigned Florida document number A30255, hereby submits this Certificate of Dissolution.

**FIRST:** Reason for dissolution: (State why partnership is submitting dissolution)

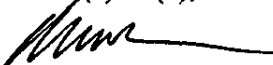
The limited partnership has disposed of all of its assets and has ceased doing business.

**SECOND:** ☐ A Notice of Dissolution is attached.  
(Check box if attached.)

**THIRD:** Effective date, if other than the date of filing: \_\_\_\_\_

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.:



Robert D. Corina  
VP of Collier Management Services, Inc.  
General Partner

Filing Fee: \$52.50  
Certified Copy (optional): \$52.50  
Certificate of Status (optional): \$8.75