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SECRETARY OF STATE DIVISION OF CORFORATION

G. MCLEOD

FEB 2 7 2008

EXAMINER

COVER LETTER

TO: Registration Section **Division of Corporations** SUBJECT: ROCK CREEK PARTNERS LTD (Name of Florida Limited Partnership or Limited Liability Limited Partnership) The enclosed Notice of Dissolution and fee(s) are submitted for filing. Please return all correspondence concerning this matter to: JAMES H DAHL OR WILLIAM L DAHL (Contact Person) (Firm/Company) PO BOX 449 (Address) PONTE VEDRA BEACH FL 32004 (City, State and Zip Code) For further information concerning this matter, please call: 904) 394-5236 (Area Code and Daytime Telephone Number) JAMES DAHL (Name of Contact Person) Enclosed is a check for the following amount: \$52.50 Filing Fee \$61.25 Filing Fee \$105.00 Filing Fee ☐ \$113.75 Filing Fee, and Certificate of and Certified Copy Certified Copy, and Certificate of Status STREET ADDRESS: **MAILING ADDRESS: Registration Section Registration Section Division of Corporations** Division of Corporations Clifton Building P. O. Box 6327

Tallahassee, FL 32314

2661 Executive Center Circle

Tallahassee, FL 32301

CERTIFICATE OF DISSOLUTION * FOR

ROCK CREEK 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 6/23/1993 _____, hereby submits this Certificate of Dissolution. FIRST: Reason for dissolution: (State why partnership is submitting dissolution) COMPLETED FINAL DISTRIBUTION OF ASSETS **VOLUNTARY DISSOLUTION 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.:

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