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#### **COVER LETTER**

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SUBJE		Proctor & Associa			ity Limi	ted Partnershi	p)	_	
The end		cate of Dissolution an	•		•		<b>,</b>		
Please	return all cor	respondence concerni	ng this	matter to:					
Peri Pro	ector								
		(Contact Person)	•		<del></del>				
		(Firm/Company)			_				
1540 N	W 3rd street #				_		<u>;</u> 1		
		(Address)					D* (2)	ज	
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For fur	ther informat	ion concerning this m	atter, pl	lease call:			•		77724
		J	, <b>.</b>				• •	••	
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•	(Name of Cont	act Person)		(Area Cod	e and D	aytime Teleph	ione Numbe	r)	
Enclose	ed is a check	for the following amo	unt:						
<b>□ \$</b> 52.50	) Filing Fee	\$61.25 Filing Fee and Certificate of Status		05.00 Filing Certified Co		\$113.75 Certified Control Certificate	opy, and		
STREE	ET ADDRES	SS:		MAIL	ING A	ADDRESS:			
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	n of Corpora	tions		Divisi	on of (	Corporations	5		
	Building				Box 63				
	xecutive Cen			Tallah	assee,	FL 32314			
Tallaha	issee, FL 323	301							

#### Cushing, Diane

From:

pproc83722@aol.com

Sent:

Wednesday, February 11, 2015 9:44 PM

To:

Cushing, Diane

Subject:

Re: Peri Proctor & Associates, Ltd

Please use jan5 2015 as effective date

Thanks

Peri Proctor

On Feb 11, 2015, at 12:27 PM, Cushing, Diane < Diane. Cushing@DOS. MyFlorida.com > wrote:

Peri Proctor

I have received your corrections back for the dissolution of this filing but you failed to correct the effective date. In my letter I advised you that the effective date could not be prior to the filing of the dissolution with our office. Do you have to have an effective date, if not can I remove the December 31, 2014 date? If you have to have an effective date the earliest date would be January 5, 2015. Please advise me what you want to do.

Diane C. Cushing
Senior Section Administrator
Amendment Section
Division of Corporations
(850) 245-6913
(850) 245-6897 (Fax)





The Department of State is committed to excellence.
Please take our <u>Customer Satisfaction Survey</u>.

### CERTIFICATE OF DISSOLUTION FOR

(Name of Florida Limited P	artnership or Limited Liability Limited Partners	ship)
•		led with the ned Florida
FIRST: Reason for dissolution: (S	State why partnership is submitting diss	olution)
Going out of business.		<del> </del>
		15     SEC
SECOND: A Notice of Disso (Check box if atta		18 12 A
THIRD: Effective date, if other than the	date of filing: 01/05/2015	<u> </u>
(Effective date cannot be prior to nor more Department of State.)	e than 90 days after the date this document is fi	
Signatures of each general partner of s. 620.1803(3) or (4), F.S.:	or the person appointed pursuant to	
Pen G. Proton,	Breadert	
Filing Fee: Certified Copy (optional):	\$52.50 \$52.50	
Certificate of Status (optional):	\$8.75	

## 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:

Description of information that must be included in a cla	aim:
no known claims	q
	2
Mailing address where claims can be sent: (Claims can Department of State)	not be sent to the Florida
1540 nw 3rd street	
Deerfield Beach, FL 33442	
Deerfield Beach, FL 33442	
Deerfield Beach, FL 33442	

Signature of a general partner or a principal of the successor endity:

\$52.50

\$52.50

Peri Proctor

Certified Copy (optional):

Filing Fee:

Printed Name