A9400000257

(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:

L. SELLERS

MAY - 2 2008

EXAMINER

Office Use Only



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04/30/08--01088--008 **122.50

SECRETARY OF STATE TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Sec Division of Cor					
SUBJECT: Lo	is Lane, L	.TD			
(Name of Flo	rida Limited Partnership	or Limited Liability Limi	ted Partnership)		
The enclosed Certificate of Dissolution and fee(s) are submitted for filing.					
Please return all corresp	pondence concerning	g this matter to:			
Joetta 1	Yewman (Contact Person)				
	(Firm/Company)	•			
		1			
Longwood	h Oak Train (Address) FL, 3277 y, State and Zip Code)	79			
	, •				
For further information concerning this matter, please call:					
Toetta Nei	Wman	at (407)2	22-1602 aytime Telephone Number)		
(Name of Contact	Person)	(Area Code and D	aytime Telephone Number)		
Enclosed is a check for the following amount:					
a	\$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:		MAILING A	ADDRESS:		
Registration Section		Registration Section			
Division of Corporations		Division of Corporations			
Clifton Building		P. O. Box 6327			
2661 Executive Center Circle		Tallahassee,	FL 32314		
Tallahassee, FL 32301		•			

CERTIFICATE OF DISSOLUTION FOR

Lois Lane	LTD	
(Name of Florida Limited P	Partnership or Limited Liability Limited Par	tnership)
	on 620.1203, Florida Statutes, this Fl ted partnership, whose certificate wa 2/28/94, he	
FIRST: Reason for dissolution: (S	State why partnership is submitting	dissolution)
Death of owner/	managing partner siness.	and
assolution of Da	zineszi	
	- V	
SECOND: A Notice of Dissol (Check box if attack)		
THIRD: Effective date, if other than the	date of filing: Date of Fili	ng
(Effective date cannot be prior to nor more Department of State.)	e than 90 days after the date this document	is filed by the Florida
Signatures of each general partner of	or the person appointed pursuant to	
s. 620.1803(3) or (4), F.S.:		
Jotto B Numa		
land surviving spouse of		
Willie B. Newman)		
Filing Fee:	\$52.50	٠
Certified Copy (optional):	\$52.50	2008 SEC SALL
Certificate of Status (optional):	\$8.75	Þž ₽

NOTICE OF DISSOLUTION FOR ORIDA I IMITED PARTNERS

YAST

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:

Lois Lane, LTD

Description of information that must be included in a claim:

All relaxant dates, amounts, and parties involved.

Mailing address where claims can be sent: (Claims cannot be sent to the Florida Department of State.)

P.O. Box 951873

Lake May, Florida

32795-1873

A claim against the above named limited partnership or limited liability limited partnership will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of the notice.

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

Joetta B. Newman Printed Name

Signature

Fee: No charge if included with Certificate of Dissolution. If filed separately \$52.50.