

(Re	equestor's Name)	
(Ad	idress)	
	,	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	ocument Number)	
(DC	cument Number)	
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04/29/14--01002--016 \*\*105.00

B. BOSTICK
MAY - 6 2014

**EXAMINER** 

## **COVER LETTER**

TO: Registration Division of	Section Corporations		
	er Reach of Orang f Florida Limited Partnersh	ge County, Ltd. hip or Limited Liability Limited Partnership)	
The enclosed Certif	ficate of Dissolution an	nd fee(s) are submitted for filing.	
Please return all con	rrespondence concerni	ng this matter to:	
Laura Pippin			
	(Contact Person)		
Royal American			
	(Firm/Company)		
1002 W. 23rd Street,	Suite 400		
	(Address)		
Panama City, FL 324	05		
	(City, State and Zip Code)	1	
For further informa	tion concerning this m	atter, please call:	
Laura Pippin		at ( 850 ) 769-8981	
(Name of Cor	ntact Person)	(Area Code and Daytime Telephon	e Number)
Enclosed is a check	for the following amo	ount:	rso tab or 6
\$52.50 Filing Fee	☐ \$61.25 Filing Fee and Certificate of Status	✓ \$105.00 Filing Fee and Certified Copy  Certificate of	y, and
STREET ADDRESS:		MAILING ADDRESS:	
Registration Section		Registration Section	
Division of Corporations		Division of Corporations P. O. Box 6327	
Clifton Building 2661 Executive Center Circle		Tallahassee, FL 32314	
Tallahassee FL 32		1 41141145550, 1 17 5 25 1 4	

## CERTIFICATE OF DISSOLUTION FOR

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