

A94000001822

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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(Business Entity Name)

(Document Number)

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Certificates of Status \_\_\_\_\_

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06 MAY 23 PM 12:41

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT: PINE TREE CENTER LIMITED PARTNERSHIP**  
(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:

**NOEL ADDRESS**

(Contact Person)

**SUNMARK REALTY INC.**

(Firm/Company)

**P.O. BOX 420**

(Address)

**PINELAND, FL 33945**

(City, State and Zip Code)

For further information concerning this matter, please call:

**NOEL ADDRESS** at ( **239** ) **283-1717**  
(Name of Contact Person) (Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

- |  |   |  |   |
|--|---|--|---|
| <input checked="" type="checkbox"/> \$52.50 Filing Fee | <input type="checkbox"/> \$61.25 Filing Fee<br>and Certificate of<br>Status | <input type="checkbox"/> \$105.00 Filing Fee<br>and Certified Copy | <input type="checkbox"/> \$113.75 Filing Fee,<br>Certified Copy, and<br>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



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 20, 2006

NOEL ANDRESS  
SUNMARK REALTY INC.  
PO BOX 420  
PINELAND, FL 33945

SUBJECT: PINE TREE CENTER LIMITED PARTNERSHIP  
Ref. Number: A94000001822

We have received your document for PINE TREE CENTER LIMITED PARTNERSHIP and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 620.8105(6), Florida Statutes, any statement filed by a partnership must be executed by at least two partners.

On the Notice of Dissolution you must fill out Description. The Statement of Termination is an additional filing fee of \$52.50.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6067.

Neysa Culligan  
Document Specialist

Letter Number: 806A00027134

**CERTIFICATE OF DISSOLUTION  
FOR**

**PINE TREE CENTER LIMITED PARTNERSHIP**

(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 DECEMBER 22, 1994, hereby submits this Certificate of Dissolution.

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

**ALL AFFAIRS OF PARTNERSHIP ARE COMPLETED**

**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.:

Noel Andreas  
C. John Kronberg

Noel ANDREAS  
C. John Kronberg

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

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06 MAY 23 PM 12:41  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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:

PINE TREE CENTER LIMITED PARTNERSHIP

Description of information that must be included in a claim:

NAME OF COMPANY  
Date of claim  
products that were purchased

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

SUNMARK REALTY INC.

P.O. BOX 420, 7101 CAPRI LANE

PINELAND, FL 33945

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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:

Noel Andress  
Printed Name

Noel Andress  
Signature

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