A95000000183

(Red	questor's Name)	
(Add	ress)	
(Add	ress)	
(City	//State/Zip/Phon	e#)
PICK-UP	MAIT	MAIL
/Proc	iness Entity Nar	
(Dus	aness Enuty Nar	ne)
(Doc	ument Number)	
(200	amone (vambor)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Sling Officer	
opecial manucions to r	aing Onicer,	
		5-15
 -		(1)
	Office Use On	



800073889968

manager make a section

SECULATION OF STATE TANK AND STATE

HLED

Kop

COVER LETTER

TO:	Registration Division of	Section Corporations				
SUBJI	ECT: <u>Flo</u> e (Name o	ri da Prescra f Florida Limited Partnersh	itory School:	S Manager ited Partnership)	nent L	+0.
The en	closed Certit	ficate of Dissolution ar	nd fee(s) are submitted	for filing.		
Please	return all co	rrespondence concerni	ng this matter to:			
300	O Cypr	(Contact Person) (Firm/Company) (Address) (Address) (City, State and Zip Code)	Rd.		SECH SELECT OF STATE FLORIDA	06 MAY -4 AM 10: 02
For fu	ther informa	tion concerning this m	atter, please call:			
St	(Name of Con	rordon tact Person)	at (954) S (Area Code and D	598 - 6704 Daytime Telephone Num	iber)	
Enclos	ed is a check	for the following amo	unt:			
11-85 2.5	0 Filing Fee	\$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	e,	
Registr Division Clifton	ET ADDRE ration Section on of Corpora Building executive Cer	n ations	MAILING Registration Division of O P. O. Box 63 Tallahassee,	Section Corporations 327		

Tallahassee, FL 32301

CERTIFICATE OF DISSOLUTION FOR

(Name of Florida Limited P	artnership or Li	imited Liability Limited Partnership)	
partnership or limited liability limit	ed partnershi	Florida Statutes, this Florida limited ip, whose certificate was filed with the hereby submits this	
FIRST: Reason for dissolution: (S	State why par	rtnership is submitting dissolution)	
Business purpo	nse t	erminated by	>
Business purpo	sent d	P xxtxcs OF STATE PLOPRIDA	OS MAY
		FE PE	,
SECOND: A Notice of Dissol (Check box if attac		ched.	
THIRD: Effective date, if other than the	date of filing:	·	
(Effective date cannot be prior to nor more Department of State.)	e than 90 days o	after the date this document is filed by the Florida	
Signatures of each general partner of s. 620.1803(3) or (4), F.S.:	or the person	appointed pursuant to	
		Philip E. Morgan	
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$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:

Florida Preparatory Schools Management Description of information that must be included in a claim: Name, address, phone, amount of claim reason for claim and all supporting documentation. Mailing address where claims can be sent: (Claims cannot be sent to the Florida Department of State.) Stary Gordon, Meritas, 3000 W. press Creek Rd., Fort Lauderdale, 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;

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