

A 95000001573

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

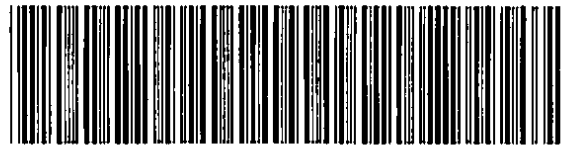
(Document Number)

Certified Copies \_\_\_\_\_

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

Special Instructions to Filing Officer:

Office Use Only



500316465945

07/31/18--11:19--11:19--11:19

18 JUL 31 PM 2:19  
TALLAHASSEE, FLORIDA

UP cont. of DSS.  
w/notice  
meek

BL. VORISEK

AUG 7 2018

## COVER LETTER

**TO:** Registration Section

Division of Corporations

**SUBJECT:** Applefield Eight Family 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:

R. Eugene Clenney, Jr., Esq.

(Contact Person)

JOHNSTON HINESLEY PC

(Firm/Company)

291 North Oates Street

(Address)

Dothan, Alabama 36303

(City, State and Zip Code)

For further information concerning this matter, please call:

Megan Phillips

at (

334

793-1115

(Name of Contact Person)

(Area Code)

(Daytime Telephone Number)

Enclosed is a check for the following amount:

☐ \$52.50 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

**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

**CERTIFICATE OF DISSOLUTION  
FOR**

Applefield Eight Family 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 10/17/1995, assigned Florida document number A95000001573, hereby submits this Certificate of Dissolution.

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

Unanimous consent of members of limited partnership.

**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.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.:

Skybound, Inc., General Partner

By: Bryan M. Applefield, President

(X) 

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

STATE DEPT OF STATE  
TALLAHASSEE, FLORIDA

10 JUL 31 PM 2:19

**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 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:  
Applefield Eight Family Limited Partnership

Description of information that must be included in a claim:

A statement describing the nature of the claim, the date incurred and the amount of the claim and

any supporting documentation for the claim.

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

JOHNSTON HINESLEY PC

291 North Oates Street

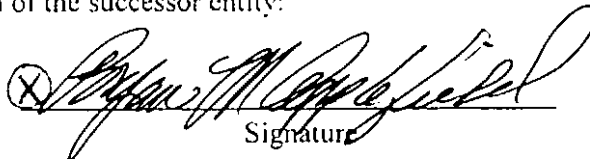
Dothan, Alabama 36303

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:

Skybound, Inc., General Partner  
Bryan M. Applefield, President

Printed Name

  
Signature

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

18 JUL 31 PM 2:20