278000001PA

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
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MAY 28 2010

EXAMINER



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COVER LETTER

#

Division of	Section Corporations		
SUBJECT: EAT	ON STREET, LTD	D	
(Name o	f Florida Limited Partnersh	ip or Limited Liability Lim	nited Partnership)
The enclosed Certif	ficate of Dissolution an	d fee(s) are submitted	for filing.
Please return all co	rrespondence concernir	ng this matter to:	
RICHARD M. KLITE			
	(Contact Person)		
RICHARD M. KLITEI			
	(Firm/Company)		
1009 SIMONTON ST	REET		
	(Address)		
KEY WEST, FLORID	A 33040		
	(City, State and Zip Code)		
For further informa	tion concerning this ma	atter, please call:	,
RICHARD KLITENIC	K	at (305) 29	2-4101
(Name of Cor	ntact Person)	(Area Code and I	Daytime Telephone Number)
Enclosed is a check	for the following amount	unt:	
☑ \$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 ADDRE	SS:	MAILING	ADDRESS:
Registration Section		Registration Section	
Division of Corporations		Division of Corporations	
Clifton Building 2661 Executive Cer	nter Circle	P. O. Box 6 Tallahassee	_
Tallahassee, FL 32		i ananassee,	, I'L 32314

CERTIFICATE OF DISSOLUTION FOR

EATON STREET, LTD.			- [
(Name of Florida Limited Pa	artnership or Limi	ted Liability Limited Partnership)	
Pursuant to the provisions of section partnership or limited liability limited liability limited. Florida Department of State on MA document number A96000000876 Dissolution.	ed partnership, Y 8, 1996	whose certificate was filed with the , assigned Florida	
FIRST: Reason for dissolution: (S	State why partn	ership is submitting dissolution)	
DISSOLUTION OF LIMITED PARTNE	RSHIP DUE TO	DISPOSITION OF ALL PARTNERSHIP	_
ASSETS, PER SPECIAL MEETING M	INUTES OF DE	CEMBER 8, 2009.	
<u>-</u>			-
			-
SECOND: A Notice of Disso (Check box if atta	ched.)		
(Effective date cannot <u>be prior to</u> nor more Department of State.)	e than 90 days afte	er 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 ap	opointed pursuant to	
	<u> </u>	WILLIAM P. HONN	-
	_		- 9 - V
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75	PO MAY 25 P	· 清潔 284