

Division of Corporations

Page 1 of 1

A9600000895
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 205-8842
Fax Number : (850) 878-5368

**DISS/TERM/CANCEL/REV OF LP/LLP
CAL PLAZA HOLDINGS ASSOCIATES, LTD.**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$105.00

RECEIVED
15 MAR 19 AM 10:00
BUREAU OF COMMERCIAL
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

MAR 20 2015
J. HARRIS

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CAL PLAZA HOLDINGS ASSOCIATES, LTD.
(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:

NICOLE BARILLARO
(Contact Person)

BEACHWOLD RESIDENTIAL LLC
(Firm/Company)

192 LEXINGTON AVE, SUITE 901
(Address)

NEW YORK, NY 10016
(City, State and Zip Code)

For further information concerning this matter, please call:

NICOLE BARILLARO at (646) 354-2114
(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
and Certificate of
Status | <input type="checkbox"/> \$105.00 Filing Fee
and Certified Copy | <input type="checkbox"/> \$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**

CAL PLAZA HOLDINGS ASSOCIATES, LTD.

(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 MAY 10, 1996, assigned Florida document number A96000000896, hereby submits this Certificate of Dissolution.

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

Sale of investment property, no longer conducting business.

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. Cal Plaza GP, Inc.

By:

Gideon Z. Friedman

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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