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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
	sinoss Entity Nom	<u></u>
(Bu	siness Entity Nam	e)
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Certified Copies	of Status	
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Special Instructions to	Filing Officer:	

Office Use Only



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MAR 2 7 2013

D. BRUCE

COVER LETTER

TO:	Registration Section Division of Corporations					
SUBJ	ECT: Associated Proposition (Name of Florida Limited I					
DOC	UMENT NUMBER: A970	00000	2161		 	
The e	nclosed Statement of Dissoci	ation an	id fee(s) are subm	itted for filing.		
Please	e return all correspondence co	oncernin	ng this matter to:			
Jani	ce C Dickinson					
	(Contact Pers	son)		-		
Ass	ociated Property Man	agem	ent LP			
	(Firm/Compa	my)		-		
266	Egret Way				~~4	_
	(Address))		-	ALL	2013 -
Wes	ston, Fl. 33327				3 36 36 3	AR T
	(City, State and Z	in Code)		-	SS	V grance
		•			m.,	עכ
For fu	orther information concerning	this ma	atter inlease call:			
`		5	· ·	240 0074		5
Janii	ce Dickinson		_at (_954	<u>) 349-6071</u>	<u> </u>	5
	(Name of Contact Person)		(Area Code	and Daytime Telephor	ne Number)	
\checkmark	\$52.50 Filing Fee		\$105.00 Filing	Fee and Certified	Сору.	
Regis Divisi Clifto 2661	tration Section on of Corporations n Building Executive Center Circle nassee, FL 32301		Registr Divisio P. O. B	ING ADDRESS: ration Section on of Corporations fox 6327 assee, FL 32314		
CR2E1	18 (01/06)					

STATEMENT OF DISSOCIATION FOR GENERAL PARTNER OF LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

Pursuant to the provisions of section 620.1605, Florida Statutes, the undersigned general partner hereby dissociates from the following limited partnership or limited liability limited partnership:

1. The name of Limited Partnership or Limited Liability Limited Partnership is:

Associated Property Management LP

2. The name of the dissociating general partner is:

Associated Property Management Inc

Signature of Dissociating General Partner

Filing Fee: \$52.50 Certified Copy (optional): \$52.50