

A98000000543



Comfort Suites
World Golf Village

On Interstate 95 at Exit 323
475 Commerce Lake Drive
St. Augustine, Florida 32095

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

(Document Number)

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STATE
TALLAHASSEE, FLORIDA

05 JUN 15 PM 1:18

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TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: American Family Housing II, Ltd
(Name of Limited Partnership)

DOCUMENT NUMBER: A 98000000543

The enclosed Certificate of Cancellation and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

John Shea
(Name of Person)

Affiliated American Inns, Ltd
(Firm/Company)

475 Commerce Lake Drive
(Address)

St. Augustine, FL 32095
(City/State and Zip Code)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Stephanie Stubbs at (904) 940 9500
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$52.50 Filing Fee

☐ \$61.25 Filing Fee &
Certificate of Status

☐ \$105.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$113.75 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

May 6, 2005

AMERICAN FAMILY HOUSING II, LTD.
475 COMMERCE LAKE DRIVE
ST. AUGUSTINE, FL 32095

SUBJECT: AMERICAN FAMILY HOUSING II, LTD.
Ref. Number: A98000000543

We have received your document for AMERICAN FAMILY HOUSING II, LTD. and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$27.50. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The form you submitted is for a general partnership, but your entity is a limited partnership. Enclosed is the proper form for your limited partnership.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6958.

Lee Rivers
Document Specialist

Letter Number: 805A00032780

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**CERTIFICATE OF CANCELLATION
FOR**

American Family Housing II, Ltd

(Insert name currently on file with Florida Dept. of State)

Pursuant to the provisions of section 620.113, Florida Statutes, this Florida limited partnership, whose certificate was filed with the Florida Department of State on Feb 26, 1998, hereby submits this Certificate of Cancellation.

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

*Partnership dissolved
closed business*

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STATE DEPT OF STATE
TALLAHASSEE, FLORIDA

SECOND: This Certificate of Cancellation shall be effective at the time of its filing with the Florida Department of State.

THIRD: Signatures of all general partners:

John W. Johnson, General Partner