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COVER LETTER

TO:	_		n Section		
	Divis	sion o	f Corporations		
SUBJ	ECT:	ZP N	O. 60, LIMITED PARTNER	SHIP	
		(Nam	e of Florida Limited Partners	ship or Limited Liability Lin	nited Partnership)
The er	nclosed	d State	ement of Termination ar	nd fee(s) are submitted t	for filing.
Please	returr	all c	orrespondence concerni	ng this matter to:	
DONN.	A DICK	ŒNS			
			(Contact Person)		
ZIMMI	ER ANI	O ZIM	MER, L.L.P.		
			(Firm/Company)		
РО ВО	X 2628	3			
	•		(Address)		
WILMI	INGTO	N, NC	28402		,
		_	(City, State and Zip Code)		
For fu	rther i	nform	ation concerning this m	atter, please call:	
DONN	A DICE	CENS		at (910) 763-	4669 X 204
	(1)	Name o	f Contact Person)	(Area Code and D	Paytime Telephone Number)
Enclos	sed is	a chec	k for the following amo	ount:	
X \$52.5	50 Filin	g 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:				MAILING ADDRESS:	
Registration Section				Registration Section	
Division of Corporations			rations	Division of Corporations	
Clifton Building 2661 Executive Center Circle			enter Circle	P. O. Box 6327 Tallahassee, FL 32314	
Tallahassee, FL 32301				i ananassee,	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

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STATEMENT OF TERMINATION FOR

ZP NO. 60, LIMITED PARTNERSHIP

(Name of Florida Limited Pa	artnership or	Limited Liability Limited Partners	ship)
Pursuant to the provisions of section partnership or limited liability limite Florida Department of State on May Statement of Termination.	ed partners	ship, whose certificate was fi	
The limited partnership or limited lits affairs and wishes to file a staten			ed winding up
Signatures of each general partner of s. 620.1803(3) or (4), F.S.: ZP NO. 60 Member, Fnc., its: By: Jeffrey L. Zimmer, President			
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75		2023 NOV 14 AM 11: 50 SECRETARY OF STATE