A98000001914

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT M	AIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status _	
Special Instructions to Filing Officer:	
	/

Office Use Only



600094175896

04/02/07--01004--015 **61.25



FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302

155 Office Plaza Drive, Suite A Tallahassee, FL 32301 PHONE: (850) 216-0457; FAX: (850) 216-0460

DATE:

03-30-07

NAME:

EAST PORT CENTER, LTD

TYPE OF FILING: DISSOLUTION

COST:

CK FOR \$61.25 ATTACHED

RETURN:

CERTIFICATE OF STATUS

ACCOUNT: FCA0000000015

AUTHORIZATION: ABBIE/PAUL HODGE

CERTIFICATE OF DISSOLUTION FOR

East Port Center, Ltd.	LEG A
(Name of Florida Limited Partners	nip or Limited Liability Limited Partnership)
partnership or limited liability limited par	nip or Limited Liability Limited Partnership) 1203, Florida Statutes, this Florida limited the threship, whose certificate was filed with the 1, 1998, hereby submits this control of the
FIRST: Reason for dissolution: (State v	why partnership is submitting dissolution)
Pursuant to the partnership ag	reement of the partnership, the occurrence
of an event providing for the d	issolution of the partnership has
occurred.	
	U 14 / 14 / 14 / 14 / 14 / 14 / 14 / 14
SECOND: A Notice of Dissolution (Check box if attached.) THIRD: Effective date, if other than the date of	
(Effective date cannot be prior to nor more than ! Department of State.)	00 days after the date this document is filed by the Florida
Signatures of each general partner or the s. 620.1803(3) or (4), F.S.: East Port Center, Ltd., a Florida limited partnership	person appointed pursuant to
BY: E.J. Plesko & Associates, Florida corporation as its	
Filing Fee: \$52	, and the second
Certified Copy (optional): \$52	
Certificate of Status (optional): \$8.	75