Electronic Filing Cover Sheet

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(((H060002661563)))



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To:

Division of Corporations

Fax Number : (350)205-0383

From:

Account Name : JOHN L. TOMLINSON

Account Number : I19980000017 Phone : (954)771-9336 Fax Number : (954)771-9488

DISS/TERM/CANCEL/REV OF LP/LLP

BEARD, LTD.

Certificate of Status	0 .
Certified Copy	0
Page Count	01
Estimated Charge	\$52.50

Electronic Filing Menu

Corporate Filing Menu

Help

954-771-9488

Florida Dept of State

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November 2, 2006

FLORIDA DEPARTMENT OF STATE

₽¥ 8:

BEARD, LTD.

4991 NW 107TE AVE.

CORAL SPRINGS, FL 33076

SUBJECT: BEARD, LTD.

REF: A98000001926

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The electronic filing coversheet submitted is the correct coversheet to cancel a limited partnership, however the form submitted is for cancelling a general partnership in Florida, not a limited partnership. The form you need is online at www.sunbiz.org under FLORIDA LIMITED PARTNERSHIP FILING FORMS and is titled "Notice of Cancellation".

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

If you have any questions concerning the filing of your document, please call (850) 245-6853.

Leslie Sellers Document Specialist FAX Aud. #: H06000266156 Letter Number: 706A00064894 (((H06000266156 3)))

CERTIFICATE OF DISSOLUTION **FOR**

Beard, 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 8/13/1998, hereby submits thi Certificate of Dissolution.
FIRST: Reason for dissolution: (State why partnership is submitting dissolution)
No business activity
· · · · · · · · · · · · · · · · · · ·
SECOND: A Notice of Dissolution is attached. (Check box if attached.)
THIRD: Effective date, if other than the date of filing:
Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.:
Viruou S. Sear Sexual Partieu
THE The

\$52.50

Filing Fee: Certified Copy (optional):

\$52.50

Certificate of Status (optional):

\$8.75