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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

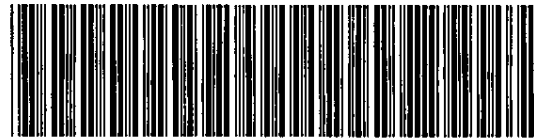
(Business Entity Name)

(Document Number)

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2014 MAY 6 10 09 AM

B. BOSTICK

MAY - 6 2014

**COVER LETTER**

**TO:** Amendment Section  
Division of Corporations

**SUBJECT:** Center Partners, Ltd.  
Name of Limited Partnership or Limited Liability Limited Partnership

**DOCUMENT NUMBER:** A99000000989

The enclosed Resignation of Registered Agent and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

William E. Scheu

Contact Person

Rogers Towers, P.A.

Firm/Company

1301 Riverplace Blvd., Suite 1500

Address

Jacksonville, FL 32207

City, State and Zip Code

wscheu@rtlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

William E. Scheu

Name of Contact Person

at ( 904 ) 346-5560

Area Code and Daytime Telephone Number

Enclosed is a check made payable to the Florida Department of State for:

☐ \$87.50 Filing Fee

☐ \$140.00 (\$87.50 Filing Fee and \$52.50 Certified Copy Fee)

**STREET ADDRESS:**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**MAILING ADDRESS:**

Amendment Section  
Division of Corporations  
P. O. Box 6327  
Tallahassee, FL 32314

**RESIGNATION OF REGISTERED AGENT  
FOR  
LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP**

Pursuant to the provisions of section 620.1116, Florida Statutes, the undersigned,

William E. Scheu, hereby resigns as  
Name of Registered Agent

Registered Agent for Center Partners, Ltd.  
Name of Limited Partnership or Limited Liability Limited Partnership

A99000000989  
Florida Document Number, if known

The agent is terminated on the 31<sup>st</sup> day after the date on which this statement is filed by the Florida Department of State.

  
Signature of Registered Agent

If signing on behalf of an entity:

\_\_\_\_\_  
Typed or Printed Name

\_\_\_\_\_  
Capacity

**Filing Fee: \$87.50**  
**Certified Copy (optional): \$52.50**

2011-09-09 10:24:13



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

April 9, 2014

WILLIAM E. SCHEU  
ROGERS TOWERS, P.A.  
1301 RIVERPLACE BLVD. #1500  
JACKSONVILLE, FL 32207

SUBJECT: CENTER PARTNERS, LTD.  
Ref. Number: A99000000989

We have received your document for CENTER PARTNERS, LTD. and your check(s) totaling \$87.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6051.

Barbara Bostick  
Regulatory Specialist II

Letter Number: 414A00007624