

A99000001308

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

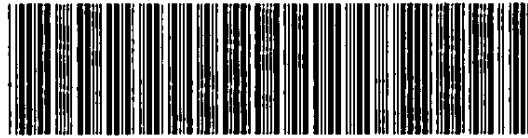
(Business Entity Name)

(Document Number)

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10 JUN 24 AM 10:28

RECEIVED OF STATE  
TALLAHASSEE, FLORIDA

D. BRUCE

JUN 25 2010

EXAMINER

**NOTICE OF DISSOLUTION  
FOR  
FLORIDA LIMITED PARTNERSHIP  
OR LIMITED LIABILITY LIMITED PARTNERSHIP**

This notice is submitted by the dissolved limited partnership or limited liability limited partnership named below or the successor entity for resolution of payment of unknown claims against this limited partnership or limited liability limited partnership as provided in s. 620.1807, F.S.

This "*Notice of Dissolution*" is optional and is not required when filing a Certificate of Dissolution.

Name of Dissolved Limited Partnership or Limited Liability Limited Partnership:  
**RETREAT-SEMINOLE LIMITED PARTNERSHIP**

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Description of information that must be included in a claim:

1) Date of claim.

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2) Amount of claim.

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3) Name and contact information of party making claim.

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4) Detailed description of claim.

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Mailing address where claims can be sent: (Claims cannot be sent to the Florida Department of State.)

c/o Hearthstone, Inc., 16133 Ventura Blvd, Suite 1400, Encino, CA 91436

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Attn: General Counsel

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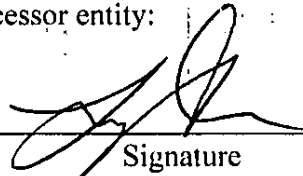
A claim against the above named limited partnership or limited liability limited partnership will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of the notice.

Signature of a general partner or a principal of the successor entity:

Tracy T. Carver

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Printed Name

  
Signature

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

10 JUN 24 AM 10:28

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