

A99000001767

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

A99-1767

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

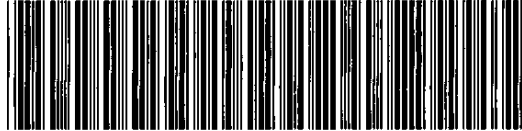
Special Instructions to Filing Officer:

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cert of diss

Office Use Only

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06 DEC -7 PM 3:13  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** ZP NO. 105, LIMITED PARTNERSHIP

(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

The enclosed Certificate of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

DONNA L. DICKENS

(Contact Person)

ZIMMER AND ZIMMER, L.L.P.

(Firm/Company)

111 Princess Street

(Address)

Wilmington, NC 28401

(City, State and Zip Code)

For further information concerning this matter, please call:

Donna Dickens at ( 910 ) 763-4669 x 204

(Name of Contact Person)

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$52.50 Filing 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:**

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

**MAILING ADDRESS:**

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

ZIMMER AND ZIMMER, L.L.P.  
ATTORNEYS AT LAW  
111 PRINCESS STREET  
WILMINGTON, NORTH CAROLINA 28401-3997  
TELEPHONE (910) 763-4669  
TELECOPIER (910) 762-1999

HERBERT J. ZIMMER  
JEFFREY L. ZIMMER (RETIRED)

MAILING ADDRESS  
POST OFFICE BOX 2628  
WILMINGTON, NORTH CAROLINA 28402

November 29, 2006

Florida Department of State  
Corporations Division  
Post Office Box 6327  
Tallahassee, Florida 32314

RE: ZP NO. 105, Limited Partnership  
Secretary of State ID: A99000001767

Dear Sir:

I am in receipt of your letter dated November 15, 2006, and appreciate the same. Pursuant to your request, I am enclosing the following items:

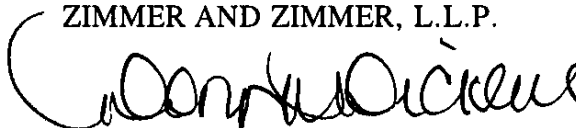
1. A copy of your said letter dated November 15, 2006;
2. Cover Letter;
3. Certificate of Dissolution for ZP NO. 105, Limited Partnership;
4. Statement of Termination for ZP NO. 105, Limited Partnership; and
5. An additional check in the amount of \$52.50.

If these documents are now acceptable, I would greatly appreciate your filing the same and thereafter returning confirmation of the same to me at your convenience.

Thank you very much for your assistance.

Sincerely,

ZIMMER AND ZIMMER, L.L.P.



Donna L. Dickens  
Paralegal to Herbert J. Zimmer  
Telephone: (910) 763-4669 x 204

DLD  
Enclosures

**CERTIFICATE OF DISSOLUTION  
FOR**

**ZP NO. 105, LIMITED PARTNERSHIP**

(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 October 26, 1999, hereby submits this Certificate of Dissolution.

**FIRST:** Reason for dissolution: (State why partnership is submitting dissolution)

The entity is no longer transacting business in the State of Florida  
and its affairs have been wound up.

**SECOND:** ☐ A Notice of Dissolution is attached.  
(Check box if attached.)

**THIRD:** Effective date, if other than the date of filing: \_\_\_\_\_.

(Effective date cannot be prior to nor more than 90 days after the date this document is filed by the Florida Department of State.)

Signatures of each general partner or the person appointed pursuant to  
s. 620.1803(3) or (4), F.S.:

ZP NO. 105 MEMBER, INC., its sole General Partner

BY: Jeffrey L. Zimmer, President

**Filing Fee:** \$52.50  
**Certified Copy (optional):** \$52.50  
**Certificate of Status (optional):** \$8.75

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TALLAHASSEE FLORIDA  
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