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(((H23000431660 3)))



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Fax Number : (850)617-6383

From:

: MORRIS A. LECOMPTE, P.A. Account Name

Account Number: 072100000461 Phone : (727)896-1000 Fax Number : (727)896-1009

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## H23000431660 3

## STATEMENT OF TERMINATION FOR

(Name of Florida Limited P.	artnership or Lin	iited Liability Li	mited Partnership)
Pursuant to the provisions of section partnership or limited liability limit Florida Department of State on 12/0 Statement of Termination.	ed partnershir	whose cerui	ficate was filed with the
The limited partnership or limited lits affairs and wishes to file a statem	iability limite nont of termin	l partnership lation.	has completed winding u
Signatures of each general partner of s. 620.1803(3) or (4), F.S.:	or the person a	ppointed pure	suant to
fold to			
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