800000039

(Requestor's Name)					
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT MAIL					
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of Status					
Special Instructions to Filing Officer:					

Office Use Only



900211096909

12/14/11--01003--002 **27.50

11/29/11--01003--018 **25.00

EXAMINER

F. HAMPTON Wrong form

COVER LETTER

TO: Registration	Section Corporations		
SUBJECT:	Piedmonta	551MM	ee fartners Lited Partners Li
The enclosed Notice	e of Cancellation and f	ce(s) are submitted for	filing.
Please return all cor	respondence concerni	ng this matter to:	
Orlie Predmont 1380 W Allanda	(Coltact Person) (Firm/Company) (Address) (City, State and Zip Code)	Betners UP Ferruld# 0327	1180
For further information	tion concerning this m	atter, please call:	
(Name of Con	Egp5 tact Person)	at (404) (Area Code and D	665-555 Daytime Telephone Number)
Enclosed is a check	for the following amo	unt:	
¥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 ADDREST Registration Section Division of Corpora Clifton Building 2661 Executive Certains Address Section 2661 Executive Certains Section 1988	n . otions	MAILING Registration Division of 6 P. O. Box 63 Tallahassee	Section Corporations 327

Tallahassee, FL 32301



RECEIVED

11 DEC 13 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

FLORIDA DEPARTMENT OF STATE Division of Corporations

November 30, 2011

JULIE EPPS PIEDMONT ATLANTA PARTNERS LP 1380 W PACES FERRY RD NW - STE 1180 ATLANTA, GA 30327

SUBJECT: PIEDMONT KISSIMMEE PARTNERS, L.P.

Ref. Number: B08000000039

We have received your document for PIEDMONT KISSIMMEE PARTNERS, L.P. and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is a balance due of \$27.50. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

The form you submitted is for a STATEMENT OF DISSOLUTION FOR PARTNERSHIP (GENERAL PARTNERSHIP), but your entity is a NOTICE OF CANCELLATION (FOREIGN LIMITED PARTNERSHIP). Please complete and return the enclosed blank form(s).

Please return the corrected original and one copy of 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) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 911A00026834

NOTICE OF CANCELLATION FOR FOREIGN LIMITED PARTNERSHIP OR

LIMITED LIABILITY LIMITED PARTNERSHIP

Piedmont A (Name of limited party	1551pmmee pership or limited liability	Partners limited partnership)	CF	2 —	
Dalla ()	3 Texasurisdiction of formation)	5			
03,	15/2008				
(Date author	ized to transact business i	n Florida)			
This foreign limited partnership or lateral transacting business in Florida and s. 620.1907, F.S.				to	
This entity appoints the Florida Derrights of action arising out of the tra			rocess	for	
Effective date, if other than the date (Effective date cannot be prior to nor more Department of State.)	of filing: 12 than 90 days after the da	- 15 - 11 ne this document is filed by	the Flor	ida	
Signature of a general partner:					
Typed or printed name: Alian S. Hardin, Jr. President of Gener	al Partner		SECE	2011 DI	,
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75	•	RETARY OF STATE WHASSEE, FLORID!	EC 13 AM 8: 09	FILED