## B93000000546

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	isiness Entity Nan	ne) 4/2
	ocument Number)	<u> </u>
(1)	cument number;	
Certified Copies	_ Certificates	s of Status
Special Instructions to Filing Officer:		

Office Use Only



500273475465

06/08/15--01034--005 \*\*25.00

07/24/15--01003--002 \*\*52.50

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## **COVER LETTER**

TO: Registration Section **Division of Corporations** SUBJECT: THE KEY WEST RAECH 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: **ANNE MARAJ** (Contact Person) WHM LLC (Firm/Company) **501 E CAMINO REAL** (Address) BOCA RATON, FL 33432 (City, State and Zip Code) For further information concerning this matter, please call: ANNE MARAJ (Name of Contact Person) (Area Code and Daytime Telephone Number) Enclosed is a check for the following amount: \$52.50 Filing Fee ■ \$105.00 Filing Fee \$61.25 Filing Fee ☐ \$113.75 Filing Fee, and Certificate of and Certified Copy Certified Copy, and Status Certificate of Status STREET ADDRESS: **MAILING ADDRESS:** Registration Section Registration Section

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

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



June 9, 2015

ANNE MARAJ WHM LLC 501 EAST CAMINO REAL BOCA RATON, FL 33432

SUBJECT: THE KEY WEST REACH LIMITED PARTNERSHIP

Ref. Number: B9300000546

We have received your document for THE KEY WEST REACH LIMITED PARTNERSHIP and your check(s) totaling \$25.00. 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.

Note the additional filing fee of \$27.50

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.

Neysa Culligan Regulatory Specialist II

Letter Number: 415A00012042

FILED

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## NOTICE OF CANCELLATION FOR FOREIGN LIMITED PARTNERSHIP LIMITED LIABILITY LIMITED PARTNERSHIP

SECRETARY	ű.	STAIL	
TALLAHASSE	Ë,	FLORID/	•

THE KEY WEST REACH LIMITED PARTNERSHIP
(Name of limited partnership or limited liability limited partnership)
DELAWARE
(Jurisdiction of formation)
12/10/1993
(Date authorized to transact business in Florida)
This foreign limited partnership or limited liability limited partnership is no longer transacting business in Florida and wishes to cancel its certificate of authority pursuant to s. 620.1907, F.S.
This entity appoints the Florida Department of State as its agent for service of process for rights of action arising out of the transaction of business in this state.
Effective date, if other than the date of filing:
Signature of a general partner;
t af
Typed or printed name:
ANTHONY BEOVICH
Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75