

B96000000383

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

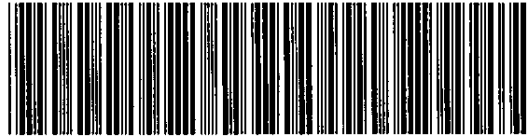
(Business Entity Name)

(Document Number)

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

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2015 JUL 23 P 2:49  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

JUL 24 2015

J. BRUCE



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

June 9, 2015

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

SUBJECT: IHC REALTY PARTNERSHIP, L.P.  
Ref. Number: B96000000383

We have received your document for IHC REALTY PARTNERSHIP, L.P. 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.

The fee to file your document is \$52.50. An additional \$52.50 is due for each certified copy requested and an additional \$8.75 is due for each certificate of status requested.

There is a balance due 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.

Deborah Bruce  
Regulatory Specialist II

Letter Number: 415A00012020

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TALLAHASSEE  
FLORIDA

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**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT: IHC REALTY PARTNERSHIP LP**

(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)

at ( 561 ) 447-5318

(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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2015 JUL 23 PM 49

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**NOTICE OF CANCELLATION  
FOR  
FOREIGN LIMITED PARTNERSHIP  
OR  
LIMITED LIABILITY LIMITED PARTNERSHIP**

**IHC REALTY PARTNERSHIP, L.P.**

(Name of limited partnership or limited liability limited partnership)

**DELAWARE**

(Jurisdiction of formation)

**10/02/1996**


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

Signature of a general partner:

 \_\_\_\_\_

Typed or printed name:

**ANTHONY BEOVICH**

**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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