B9700000158

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SECRETARY SE SCHE

UN 09 2014 J. HARRIS

COVER LETTER

TO: Registration Section		
Division of Corporations		
SUBJECT: McKibbon Ho (Name of Foreign Limited Partner	ship or Limited Liability Limited Partnership)	
The enclosed Notice of Cancellation and	fee(s) are submitted for filing.	
Please return all correspondence concern	ning this matter to:	
Bill MSDeniel (Contact Person)	18	
Mak. Sbon Hotel Group, (Firm/Company)	Inc.	
402 Washington St. SE,	, Ste. 200	
(Address)		
Course the 64 3050 (City, State and Zip Code	n /	
(City State and Zin Code	e)	
(enj, simo and enj eta	•,	
For further information concerning this i	•	
Bill Mc Deniel	at (110) 534 3381 x 218	
(Name of Contact Person)	(Area Code and Daytime Telephone Number)	
Enclosed is a check for the following am	nount:	
\$52.50 Filing Fee \$61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee \$113.75 Filing Fee, and Certified Copy Certified Copy, and Certificate of Status	
STREET ADDRESS:	MAILING ADDRESS:	
Registration Section	Registration Section	
Division of Corporations	Division of Corporations	
Clifton Building	P. O. Box 6327	
661 Executive Center Circle Tallahassee, FL 32314		

Tallahassee, FL 32301



May 7, 2014

BILL MCDANIEL 402 WASHINGTON ST SE, SUITE 200 GAINESVILLE, GA 30501

SUBJECT: MCKIBBON HOTEL GROUP OF TAMPA, FLORIDA #2, L.P.

Ref. Number: B9700000158

We have received your document for MCKIBBON HOTEL GROUP OF TAMPA, FLORIDA #2, 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 Foreign LLC, but your entity is a Foreign LP. Please complete and return the enclosed blank form(s).

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.

Jenna D Harris Regulatory Specialist II

Letter Number: 914A00009742

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

Mckipbon Hotel Grup a	+ Toupa,	Florida #0	2, L. P.	
(Name of limited partr	nership or limited	liability limited pa	rtnership)	
(neoraia				
(Jurisdiction of formation)				
March 25,199	97			
(Date author	ized to transact b	usiness in Florida)		
This foreign limited partnership or transacting business in Florida and s. 620.1907, F.S.				
This entity appoints the Florida Derrights of action arising out of the tra				
Effective date, if other than the date (Effective date cannot be prior to nor more Department of State.)	e of filing: e than 90 days aft	er the date this doc	ument is filed by the Florida	
Signature of a general partner: Typed or printed name:				
Dovid J. Hughe, Presid	ert, McK	bbon Aptel	Group, Inc., it	
Filing Fee:	\$52.50	gen	mal po-tuen	
Certified Copy (optional):	\$52.50	-		
Certificate of Status (optional):	\$8.75		. •	