

B970000000480

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

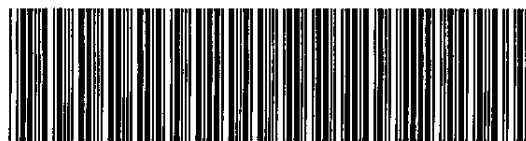
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
07 JAN 29 PM 1:10

J. BRYAN *W* JAN 17 2007

J. BRYAN JAN 29 2007



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 17, 2007

ALLEN WEBER
ALLEN WEBER CPA
2525 PALMER AVENUE
NEW ROCHELLE, NY 10801

SUBJECT: PARKSIDE CLEARWATER ASSOCIATES, L.P.
Ref. Number: B97000000480

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We have received your document for PARKSIDE CLEARWATER ASSOCIATES, L.P. and your check(s) totaling \$61.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

You completed the wrong form

We are enclosing the proper form(s) with instructions for your convenience.

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) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 207A00003773

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Parkside Clearwater Associates, LP
(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

The enclosed Statement of Termination and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Allen Weber
(Contact Person)

Allen Weber CPA
(Firm/Company)

2525 Palmer Avenue
(Address)

New Rochelle, NY 10801
(City, State and Zip Code)

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For further information concerning this matter, please call:

Allen Weber at (914) 636-8400
(Name of Contact Person) (Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$52.50 Filing Fee | <input checked="" type="checkbox"/> \$61.25 Filing Fee
and Certificate of
Status | <input type="checkbox"/> \$105.00 Filing Fee
and Certified Copy | <input type="checkbox"/> \$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

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

PARKSIDE OCEANWATER ASSOCIATES, LP

(Name of limited partnership or limited liability limited partnership)

NEW YORK

(Jurisdiction of formation)

09/02/1997

(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:

Allen Weber, Pres

Typed or printed name:

SPAW REALTORS, INC

Filing Fee:	\$52.50
Certified Copy (optional):	\$52.50
Certificate of Status (optional):	\$8.75

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