## B98000000236

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





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**400248596014** 06/10/13--01028--007 \*\*113.75

13 JUN 21 AM 8: 02

SECRETARY OF STATE OF STATE OF CORPORATIONS

JUN 2 4 2013

T. HAMPTON

## COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: Danger Tarthership or Limited Liability Limited Partnership)	
The enclosed Notice of Dissolution and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to:	
Place 11 to chocks 1P	
1329 (Firm/Company) Or kuray	
(City, State and Zip Code)	
For further information concerning this matter, please call:    Donna Clark   at (732) 751-1119, ord 410 (Area Code and Daytime Telephone Number)	X)
Enclosed is a check for the following amount:	
\$52.50 Filing Fee \$\bigcup \\$61.25 Filing Fee and Certificate of Status \$\bigcup \\$105.00 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	



RECEIVED

13 JUN 21 AM 6: 47

SECRETARY OF STATE TALLAHASSEE, FLORIDA

June 11, 2013

JULES L PLANGERE 129 CAMPASS PKWY NEPTUNE, NJ 07753

SUBJECT: PLANGERE PARTNERS, L.P.

Ref. Number: B9800000236

Upon receipt of your letter and/or check(s) totaling \$ 25.00, no documentwas found.

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

Please return 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.

Tammy Hampton
Regulatory Specialist II

Letter Number: 113A00014654

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

LIMITED LIABILITY LIMITED PARTNERSHIP (Name of limited partnership or limited liability limited partnership) (Jurisdiction of formation) (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 partr

Typed or printed name:

Filing Fee:

Certified Copy (optional):

\$52.50

Certificate of Status (optional):

\$8.75