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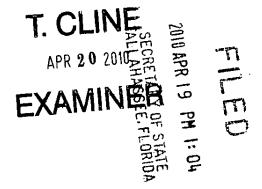
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COVER LETTER

TO: Registration So Division of Co				
SUBJECT: 455 Bu	uilding, LTD Iorida Limited Partnershi	ip or Limited Liability Lim	ited Partnership)	I
The enclosed Certifica	ate of Dissolution an	d fee(s) are submitted	for filing.	
Please return all corre	spondence concernir	ng this matter to:		
Stuart J. Zook				
	(Contact Person)			
Newport Property Ventu	ıres, LTD			
	(Firm/Company)			
3211 Ponce De Leon B	lvd #202			
02111 01100 00 20011 01	(Address)			
Coral Gables, Florida 33				
(C	ity, State and Zip Code)			
For further informatio	n concerning this ma	atter, please call:	7 2	
Vivian Sanchez		at (305) ·446	50010 5d9-3334	الارتين. الارتين
(Name of Contac	t Person)		Daytime Telephone Nilmber)	and the same
Enclosed is a check for	or the following amo	unt:	AR ASS	
☑ \$52.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee and Certified Copy	S113.75 Filing Page, Certified Copy, and Certificate of Status	,
STREET ADDRESS:		MAILING.		
		Registration		
Division of Corporations			Corporations	
Clifton Building 2661 Executive Center Circle		P. O. Box 6327 Tallahassee, FL 32314		
Tallahassee, FL 3230		i allahassee,	FL 32314	

CERTIFICATE OF DISSOLUTION **FOR**

455 Building, LTD		
(Name of Florida Limited Page 1997)	artnership or Limited Liability Limited Partnershi	p)
partnership or limited liability limit Florida Department of State on Feb	n 620.1203, Florida Statutes, this Florida ed partnership, whose certificate was filed bruary 25, 2004, assigned, hereby submits this Certificate	d with the d Florida
FIRST: Reason for dissolution: (S	State why partnership is submitting dissol	ution)
Sale and disposition of partnership pro	perty.	
	, , , , , , , , , , , , , , , , , , , ,	
SECOND: A Notice of Disso	olution is attached.	
(Check box if atta		2010 TAL
THIRD: Effective date, if other than the o	date of filing:	2010 APR SECRE
	than 90 days after the date this document is filed	t by the Llorida
Signatures of each general partner of s. 620.1803(3) or (4), F.S.:	or the person appointed pursuant to	PH 1: 04 OF STATE EFLORIDA
647		
Filing Fee: Certified Copy (optional):	\$52.50 \$52.50	
Certificate of Status (optional):	\$8.75	