A0400001590

(Re	questor's Name)	 	
(Ad	dress)		
(Ad	dress)		
(Cit	y/State/Zip/Phone	e #)	
PICK-UP	MAIT	MAIL	
(Bu	siness Entity Nan	ne)	
(Do	cument Number)		
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			

Office Use Only



100256847121

02/20/14--01032--014 **105.00

2014 FEB 20 M 10: 01
SECRETARY OF STATE

COVER LETTER

Đ

то:	Registration Division of	Section Corporations		
SUBJ			S LIMITED PART	
The er			nd fee(s) are submitted	• • • • • • • • • • • • • • • • • • • •
Please	e return all cor	respondence concerni	ng this matter to:	
MORR	IS ENGELBER	G, ESQUIRE		
		(Contact Person)		
M. EN	GELBERG & L.	MILGRIM, P. A.		
		(Firm/Company)		
4040.5	SHERIDAN ST	REET		
		(Address)		
HOLLS		UDA 00004		
MOLL	YWOOD, FLOR	(City, State and Zip Code)		
	'	(City, State and Zip Code)		
For fu	rther informat	ion concerning this m	atter, please call:	
_			at (
	(Name of Cont	act Person)	(Area Code and D	Daytime Telephone Number)
Enclos	sed is a check	for the following amo	unt:	
\$52.5	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
STRE	ET ADDRES	SS:	MAILING	ADDRESS:
Registration Section		Registration Section		
Division of Corporations		Division of 6	Division of Corporations	
Clifton Building			P. O. Box 6327	
	Executive Cen		Tallahassee,	FL 32314
Tallah	assee FL 323	111		

FILED

2014 FEB 20 AM 10: 02

CERTIFICATE OF DISSOLUTION FOR

SECRETARY OF STATE TALLAHASSEE, FLORIDA

+

FREID ENTERPRISES LIM (Name of Florida Limited Pa	ITED PARTNERSHIP rtnership or Limited Liability Limited Partnership)
partnership or limited liability limite	d 620.1203, Florida Statutes, this Florida limited ed partnership, whose certificate was filed with the 12/02/2004, assigned Florida, hereby submits this Certificate of
FIRST: Reason for dissolution: (S	tate why partnership is submitting dissolution)
The General Partner and all the Limited	Partners determined it was in their respective
best interest to dissolve the limited part	nership.
SECOND: A Notice of Disso (Check box if attack	
THIRD: Effective date, if other than the d	ate of filing: FEBRUARY 28, 2014
(Effective date cannot be prior to nor more Department of State.)	than 90 days after the date this document is filed by the Florida
Signatures of each general partner o s. 620.1803(3) or (4), F.S.:	r the person appointed pursuant to
	FREID INVESTMENTS, INC. General Partner
	BARRY PREID, President
Filing Fee:	\$52.50
Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$8.75

NOTICE OF DISSOLUTION FOR FLORIDA LIMITED PARTNERSHIP OR LIMITED LIABILITY LIMITED PARTNERSHIP

This notice is submitted by the dissolved limited partnership or limited liability limited partnership named below or the successor entity for resolution of payment of unknown claims against this limited partnership or limited liability limited partnership as provided in s. 620.1807, F.S.

This "Notice of Dissolution" is optional and is not required when filing a Certificate of Dissolution.

Name of Dissolved Limited Partnership or Limited Liability Limited Partnership:

FREID ENTERPRISES LIMITED PARTNERSHIP

Description of information that must be included in a claim: Name, street address, mailing address, and telephone number of claimant. Nature of claim. Amount of claim. Evidence of the indebtedness and/or claim. Mailing address where claims can be sent: (Claims cannot be sent to the Florida Department of State) MORRIS ENGELBERG, ESQUIRE M. ENGELBERG & L. MILGRIM, P. A. 4040 SHERIDAN STREET

A claim against the above named limited partnership or limited liability limited partnership will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of notice.

Signature of a general partner or a principal of the successor entity:

BARRY FREID

Printed Name

HOLLYWOOD, FLORIDA 33021

Filing Fee:

\$52.50

Certified Copy (optional):

\$52.50