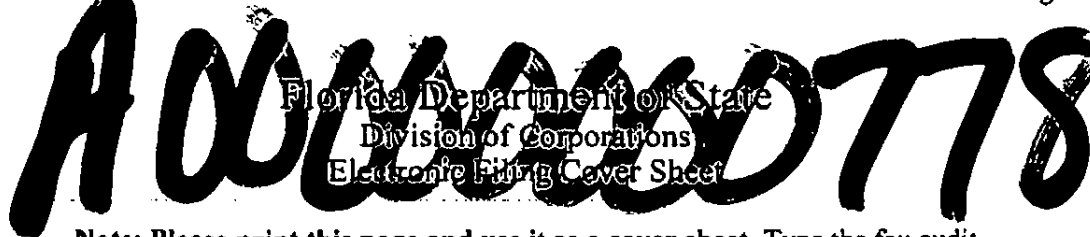


Division of Corporations

Page 1 of 1



Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H14000151722 3)))



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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : C T CORPORATION SYSTEM
Account Number : FCA000000023
Phone : (850) 222-1092
Fax Number : (850) 878-5368

**DISS/TERM/CANCEL/REV OF LP/LLP
THE NPV FAMILY LIMITED PARTNERSHIP**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$52.50

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14 JUN 24 PM 3:36
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TALLAHASSEE, FLORIDA

Electronic Filing Menu

Corporate Filing Menu

Help

JUN 25 2014

J. BRUCE

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The NPV Family Limited Partnership
(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

The enclosed Certificate of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

J. Thomas MacFarlane
(Contact Person)

Clerk Hill PLC
(Firm/Company)

151 S. Old Woodward, Ste. 200
(Address)

Birmingham, Michigan 48009
(City, State and Zip Code)

For further information concerning this matter, please call:

J. Thomas MacFarlane at (248) 988-5846
(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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2014 JUN 24 AM 10:56

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**CERTIFICATE OF DISSOLUTION
FOR**

The NPV Family Limited Partnership
(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

Pursuant to the provisions of section 620.1203, Florida Statutes, this Florida limited partnership or limited liability limited partnership, whose certificate was filed with the Florida Department of State on 05/08/2000, assigned Florida document number A00000000778, hereby submits this Certificate of Dissolution.

FIRST: Reason for dissolution: (State why partnership is submitting dissolution)

The General and Limited Partners deem it advisable that the business of the Partnership be discontinued and that the Limited Partnership be dissolved.

SECOND: ☐ A Notice of Dissolution is attached.
(Check box if attached.)

THIRD: 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.)

Signatures of each general partner or the person appointed pursuant to s. 620.1803(3) or (4), F.S.:

Diane Peterson

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

SECRETARY OF STATE
PALM BEACH, FLORIDA

2014 JUN 24 AM 10:56

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