





FLORIDA DEPARTMENT OF STATE  
Division of Corporations

December 28, 2011

KRISTIN SMYKLO  
CHAPIN BALLERANO & CHESLACK  
1201 GEORGE BUSH BLVD  
DELRAY BEACH, FL 33483

SUBJECT: KELLEY FAMILY INTERESTS, LTD.  
Ref. Number: A00000001392

We have received your document for KELLEY FAMILY INTERESTS, LTD. and check(s) totaling \$25.00 of which \$25.00 has been designated to file this document. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

There is an additional amount of \$27.50 due. Refer to the attached fee schedule for a breakdown of the fees. Please return a copy of this letter to ensure your money is properly credited.

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) 245-6020.

Tammi Cline  
Regulatory Specialist II

Letter Number: 111A0002879

SECRETARY OF STATE  
JAN 17 2012  
TALLAHASSEE, FLORIDA

2012 JAN 17 PM 3:13

FILED

**CERTIFICATE OF DISSOLUTION  
FOR**

**KELLEY FAMILY INTERESTS, LTD.**

(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 9-5-2000, assigned Florida document number A00000001392, hereby submits this Certificate of Dissolution.

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

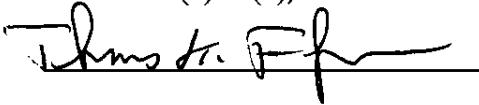
THE GENERAL PARTNER AND THE LIMITED PARTNERS HAVE DECIDED THAT IT IS IN THE BEST  
INTEREST TO DISSOLVE THE PARTNERSHIP AND DISTRIBUTE THE PARTNERSHIP ASSETS  
IN ACCORDANCE WITH THE PARTNERSHIP AGREEMENT

**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.:



<b>Filing Fee:</b>	<b>\$52.50</b>
<b>Certified Copy (optional):</b>	<b>\$52.50</b>
<b>Certificate of Status (optional):</b>	<b>\$8.75</b>

**FILED**  
**2012 JAN 17 PM 3:18**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FLORIDA**