A00000001537

(Re	equestor's Name)			
(Ad	ldress)			
(Ac	dress)			
(Cir	ty/State/Zip/Phone	- 		
(Ci	tyrotaterzipri none	у т <i>)</i>		
PICK-UP	☐ WAIT	MAIL.		
(D)				
(Bt	isiness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				
		;		
		,		

Office Use Only



600155958736

05/20/09--01008--006 **113.75

09 MAY 20 AH II: 31
SECRETARY OF STATE

D. BRUCE

MAY 21 2009

EXAMINER

COVER LETTER

TO: Registration Section Division of Corpora			
•	bert Shaw and France Limited Partnership or Limited Liability Li f Dissolution and fee(s) are submitted	nited Partnership)	- amily ct met
The enclosed Certificate of	f Dissolution and fee(s) are submitted	d for filing.	
Please return all correspond	idence concerning this matter to:		
Thomas Goe (Co) Shaw Aero (K)	ettel entact Person) Pealty Corporation em/Company) Pewood Drive (Address) Ms Florida 34/35 Inte and Zip Code)	uen]	
25190 Bern	m/Company) nwood Drive (Address)	09 MAY 2 SECRETA FALLAHA	7
Bonita Sprin	Me Florida 34/35 (Me and Zip Code)	20 AM II: 31 TARY OF STAT ASSEE, FLORI	FILED
	ncerning this matter, please call:	STATE LORIDA	: O :
Thomas Goet	te/ at (<u>239</u>) : son) (Area Code and	405-6125	
Enclosed is a check for the		Daytime Telephone Number)	
☐ \$52.50 Filing Fee ☐ \$6	51.25 Filing Fee S105.00 Filing Fee Certificate of and Certified Copy	☑ \$113.75 Filing Fee, Certified Copy, and Certificate of Status	
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Cir Tallahassee, FL 32301	Registration Division o P. O. Box	f Corporations	

CERTIFICATE OF DISSOLUTION **FOR**

Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$8.75			
Filing Fee:	\$52.50			
	_			RICA RDA
	_			AH E
Shaw Family Enterpris	es, Inc.			1117
Shady Family Enterpris	shan			AY 20 HASSI
Signatures of each general partner of s. 620.1803(3) or (4), F.S.:		pointed pursuant to	0	O9 M
Department of State.)				manual Spirit
(Effective date cannot be prior to nor more			ent is filed by the	Florida
SECOND: A Notice of Disso (Check box if attaction at the distance of Disso (Check box	ched.)			
No activity since	ncep tion	<i>7</i> .		
FIRST: Reason for dissolution: (S	tate why partne	ership is submitting	g dissolution)	
partnership or limited liability limited Florida Department of State on 10 document number 1000000000000000000000000000000000000	ed partnership,	whose certificate v	was filed with	the
Pursuant to the provisions of section				,, ,
James Robert Shaw . (Name of Florida Limited Pa	and France	<u> 212 Lange E</u>	Phaw Fam	My Limited

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: James Robert Show and Francia Lange Show Family Limited Fortnership. Description of information that must be included in a claim: Noture of claim date dollar amount person or Mailing address where claims can be sent: (Claims cannot be sent to the Florida Department of State.) Thomas Goettel Shaw Aero Realty Corporation

25190 Bernwood Drive

Bonita Springs Florida 34135 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 the notice. Signature of a general partner or a principal of the successor entity:

Fee: No charge if included with Certificate of Dissolution. If filed separately, \$52.50.