## A0100000385

(Requestor's Name)	,, <del>,</del> ,				
(Address)					
(Address)					
(City/State/Zip/Phone #)					
PICK-UP WAIT	MAIL				
(Business Entity Name)					
(Document Number)					
Certified Copies Certificates of S	Status				
Special Instructions to Filing Officer:					
/JAN '- 7 2013					
L. SELLERS					

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12/19/12--01017--020 \*\*61.25

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## COVER LETTER

TO:	Registration S Division of C					
SUBJ	ECT: Alice S (Name of F	Stillman Family L Plorida Limited Partnershi	td. p or Limi	ted Liabilit	y Limite	ed Partnership)
The er	iclosed Certific	cate of Dissolution and	d fee(s)	are subm	itted fo	or filing.
Please	return all corre	espondence concernin	g this m	natter to:		
Marta (	Goldberg, Senio				-	
		(Contact Person)				
BNYM	BNYMellon, National Association (Firm/Company)					
1450 Brickell Ave., Suite 2700 (Address)						
		( · · · · · · · · · · · · · · · · · · ·				
Miami,	FL 33131	City, State and Zip Code)			-	
	(	eny, Builo una Esp code)				
For fu	rther informati	on concerning this ma	atter, ple	ase call:		
Marta Goldberg			at (	305	_,	2926
	(Name of Contr	act Person)		(Area Code	and Da	ytime Telephone Number)
Enclo	sed is a check t	for the following amo	unt:			
\$52.	50 Filing Fee	✓ \$61.25 Filing Fee and Certificate of Status		5.00 Filing ertified Co		\$113.75 Filing Fee, Certified Copy, and Certificate of Status
STREET ADDRESS:			MAIL	ING A	ADDRESS:	
Registration Section		Registration Section				
Division of Corporations		Division of Corporations				
Clifton Building				P. O. Box 6327		
2661 Executive Center Circle Tallahassee, FL 32301				Tallah	assee,	FL 32314
iailai	iassee, FL 323	VI				



December 20, 2012

MARTA GOLDBERG BNYMELLON, NATIONAL ASSOCIATION 1450 BRICKELL AVENUE, STE. 2700 MIAMI, FL 33131

SUBJECT: ALICE STILLMAN FAMILY LTD.

Ref. Number: A0100000385

We have received your document for ALICE STILLMAN FAMILY LTD. and your check(s) totaling \$61.25. However, the enclosed document has not been filed and is being returned for the following correction(s):

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) 245-6051.

Letter Number: 412A00030118

Leslie Sellers Regulatory Specialist II

www.sunbiz.org

Fax:

## CERTIFICATE OF DISSOLUTION FOR

Alice Stillman Family Ltd.  (Name of Florida Limited Pa	utnership or Limited Liability Limited Partnership)
partnership or limited liability limite	a 620.1203, Florida Statutes, this Florida limited ed partnership, whose certificate was filed with the ch 13, 2001, assigned Florida, hereby submits this Certificate of
FIRST: Reason for dissolution: (S	tate why partnership is submitting dissolution)
All members/mangers with 100% gener	ral and limited partnership interests agreed to dissolve partnership an
appoint BNY Mellon, NA as liquidating	partner in their capacity as sole successor trustee of the Alice Stillma
irrev. Trust u/a/dtd Nov. 20, 2003, for the	ne purpose of winding down and dissolving the partnership.
Agreement approved by 15th Judicial C	Circuit, Palm Beach County, FL Case No.502012CP002557XXXXNB
SECOND: A Notice of Disso (Check box if attack	
THIRD: Effective date, if other than the d	late of filing: 12/30/12
(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 of s. 620.1803(3) or (4), F.S.:	or the person appointed pursuant to
	exerta Hillen S. V.P
	Buy moles, N.A.
Filing Fee:	\$52.50
Certified Copy (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:

Alice Stillman Family Ltd.

Description of information that must be included in a claim:

(1) Name, address, telephone number, fax number or e-mail of claimant or authorized representative of claimant, when appropriate; (2) description of claim, including whether any interest is due;

(3) documentation and proof of claim; and (4) whether claim is secured, unsecured, contingent, and/or unliquidated

Mailing address where claims can be sent: (Claims cannot be sent to the Florida Department of State.)

Marta Goldberg, Senior V.P.

BNY Mellon, N.A.

1450 Brickell Ave., Suite 2700

Miami, FL 33131

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.

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

4 years after the filing of the notice.

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

Signature