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Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850) 617-6383

L. SELLERS

APR 29 2008

From: Account Name : LAMONT, NEIMAN, INTERIAN & BELLET, P.A.
Account Number : I20000000051
Phone : (305) 530-9400
Fax Number : (305) 530-9409

EXAMINER

DISS/TERM/CANCEL/REV OF LP/LLP

SALSTEIN PARTNERS, LTD.

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$113.75

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Corporate Filing Menu

Help

(((H08000112218 3)))

**CERTIFICATE OF DISSOLUTION
FOR**

Salstein Partners, 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 04-06-2001, hereby submits this Certificate of Dissolution.

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

upon the consent of the general partner and all the
limited partners

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.:

Abraham Salstein

Howard Salstein

Filing Fee: \$52.50
Certified Copy (optional): \$52.50
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