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(Requesto	r's Name)
(Address)	
•	
(Address)	
(City/State	/Zip/Phone #)
•	
PICK-UP	WAIT MAIL
(Business	Entity Name)
(Documen	t Number)
Certified Copies	Certificates of Status
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COVER LETTER

TO: Registration Division of	Section Corporations				
SOBJECT:	IFS TITLE OF FLOR			_	
(Name	of Florida Limited Partners	hip or Limited Liability Lir	nited Partnership)		
The enclosed States	nent of Termination an	d fee(s) are submitted:	for filing.		
Please return all cor	respondence concernir	ng this matter to:			
Raymond S	uarez, Esquire				
	(Contact Person)				
Universal	Land Title, Inc.	(general partner)	SEC	07
	(Firm/Company)	_		A	8
1555 Palm	Beach Lakes Blvd.	, Suite 500		TARY	3
	(Address)	, , , , , , , , , , , , , , , , , , ,		μĊ	₽
	Beach, FL 33401 (City, State and Zip Code)	<u></u>		STATE	OCT 31 AH 10: 59
	(City, State and Zip Code)			A	
For further information	tion concerning this ma	atter, please call:			
Raymond Suarez		at (561) 689	9-8200		
(Name of Contact Person) (Area Code and Daytime Telephone Nu		Number)	_		
Enclosed is a check	for the following amo	unt:			
X \$52.50 Filing Fee	S61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee and Certified Copy	\$113.75 Fili Certified Copy, Certificate of St	and	
STREET ADDRESS Registration Section Division of Corpora Clifton Building 2661 Executive Centrallahassee, FL 32	n utions oter Circle	MAILING A Registration Division of O P. O. Box 63 Tallahassee,	Section Corporations 27		

CERTIFICATE OF DISSOLUTION FOR

MFS TITL	E OF FLORII	DA, LTD.	
(Name of Florida Limited Pr	artnership or Limi	ted Liability Limited Partne	rship)
Pursuant to the provisions of section partnership or limited liability limit Florida Department of State on Certificate of Dissolution.		whose certificate was f	
FIRST: Reason for dissolution: (S	State why partn	ership is submitting dis	solution)
Florida Statute 620.18	01; the	happening of an ex	vent
specifieddin the limited	partnership agreement		07 SE
,			AHE DCT
			SSE T
SECOND: A Notice of Dissolution is attached. (Check box if attached.)			AH IO: 59 FLORIDA
THIRD: Effective date, if other than the	date of filing:		 -
(Effective date cannot be prior to nor mor. Department of State.)	e than 90 days aft	er 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 a	ppointed pursuant to	
		Universal Land 1 by Michael Glass as General Parts	s, its President
Filing Fee: Certified Copy (optional):	\$52.50 \$52.50		
Certificate of Status (optional):	\$8.75		