## Florida Department of State

Division of Corporations Public Access System

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## DISS/TERM/CANCEL/REV OF LP/LLP

#### ANN L. KELLY FAMILY LIMITED PARTNERSHIP

Certificate of Status	1
Certified Copy	1
Page Count	03
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Tallahassee, FL 32301

### COVER LETTER

TO: Registration Division of	Section Corporations				
SÙBJECT: Ann (Name o	L. Kelly Family Li f Florida Limited Partnersh	mited Partnership	ited Partnership)		
The enclosed Certif	ficate of Dissolution ar	nd fee(s) are submitted	for filing.		
Please return all co	rrespondence concerni	ng this matter to:			
James R. Nici, Esq.		· · · · · · · · · · · · · · · · · · ·			
	(Contact Person)				
Cox & Niol					
	(Firm/Company)				
1185 Immokalee Ro	ad, Suite 110			<u> </u>	3
	(Address)			芸芸	Ę
Newton El Osso				S	<b>92</b> NNF 60
Naples, FL 34110	(City, State and Zip Code)	1			
	(City, Bizic and Zip Cone)	,		, 유도	A
For further informa	tion concerning this or	atter, please call:		STATE QAID	8:22
Jacqueline Gadberry		at ( 239 ) 254	4-0706		7/2
(Name of Cor	ntact Person)	(Area Code and D	aytime Telephone Nur	nber)	
Enclosed is a check	for the following amo	ount:			
S52.50 Filing Fee	☐ \$61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee and Certified Copy		l .	
STREET ADDRE	SS:	MAILING.	ADDRESS:		
Registration Section		Registration			
Division of Corporations		Division of Corporations			
Clifton Building		P. O. Box 6327			
2661 Executive Center Circle		Tallabassee,	FL 32314		

4 mg

# CERTIFICATE OF DISSOLUTION FOR

(Name of Florida Limited P	PARTHERSHID  Cartnership or Limited Liability Limited Partnership)	_
partnership or limited liability limit Florida Department of State on De	on 620.1203, Florida Statutes, this Florida limited ted partnership, whose certificate was filed with the cember 14, 2001, assigned Florida, hereby submits this Certificate of	
FIRST: Reason for dissolution: (	State why partnership is submitting dissolution)	
General Partner and all Limited Partner	ers want to dissolve the Limited Partnership.	_
	,	<b>-</b>
		- ≱a 8
SECOND: A Notice of Dissa (Check box if atta	olution is attached.	
THIRD: Effective date, if other than the	date of filing: May 15, 2008	
(Effective date cannot be prior to nor mor Department of State.)	e than 90 days after the date this document is filed by the Florida	8: 22
Signatures of each general partner of s. 620.1803(3) or (4), F.S.:	• • • •	
Carolani and	President	-
and Kally Ederprise	-, Aras.	-
Filing Fee:	\$52.50	<del>.</del>
Certified Copy (optional):	\$52.50	
Certificate of Status (optional):	\$8.75	