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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : CAUTHEN AND FELDMAN, P.A.
Account Number : I19980000085
Phone : (352) 343-2225
Fax Number : (352) 343-7759

DISS/TERM/CANCEL/REV OF LP/LLP
MORRIS D. ANDERSON FAMILY PARTNERSHIP, LLP

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$52.50

RECEIVED

13 DEC 30 AM 9:00

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TALLAHASSEE, FLORIDA

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13 DEC 30 AM 9:25

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13 DEC 31 2013

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Morris D. Anderson Family Partnership, LLP
(Name of Florida Limited Partnership or Limited Liability Limited Partnership)

The enclosed Certificate of Dissolution and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to:

Jodi M. Anderson

(Contact Person)

(Firm/Company)

6704 Calum Lee Rd.

(Address)

Groveland, FL 34736

(City, State and Zip Code)

For further information concerning this matter, please call:

Jodi M. Anderson

(Name of Contact Person)

(352) 429-5159

(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

☒ \$52.50 Filing Fee

☐ \$51.25 Filing Fee
and Certificate of
Status

☐ \$105.00 Filing Fee
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 Circle
Tallahassee, FL 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

FILED
13 DEC 30 AM 9:25
TALLAHASSEE, FLORIDA

**CERTIFICATE OF DISSOLUTION
FOR**Morris D. Anderson Family Partnership, LLP

(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 08/28/2002, assigned Florida document number AD2000001176, hereby submits this Certificate of Dissolution.

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

The consent of all general partners and of all
limited partners.

SECOND: ☒ A Notice of Dissolution is attached.
(Check box if attached.)**THIRD:** Effective date, if other than the date of filing: 12/31/13

(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.:

Jodi M. Anderson
Jodi M. Anderson, General Partner

Kerry J. Anderson
KERRY J. ANDERSON, General Partner

Filing Fee: \$52.50
Certified Copy (optional): \$53.50
Certificate of Status (optional): \$8.75

STATE OF FLORIDA
TALLAHASSEE
13 DEC 30 PM 6:25