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## **COVER LETTER**

TO: Registration Section	
Division of Corporations	
SUBJECT: Five Fritz Partners Limited Partnersh  (Name of Florida Limited Partnership of Florida Limited Partnership)	or Limited Liability Limited Partnership)
The enclosed Certificate of Dissolution and fee Please return all correspondence concerning the Charles Brumby, Esq.	
(Contact Person)	)
Herron Ortiz, P.A.	
(Firm/Company	)
255 Alhambra Circle, Suite 1060	TALL J
(Address)	
Coral Gables, Florida 33134	SSEE. W
(City, State and Zip Co	ode)
For further information concerning this matter,	please call:
Charles Brumby, Esq.	
(Name of Contact Person)	(Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount:	
	105.00 Filing Fee and Certified Copy  Certificate of Status
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle	MAILING ADDRESS: Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Tallahassee, FL 32301

## CERTIFICATE OF DISSOLUTION **FOR**

Five Fritz Partners Limited Partnership	
(Name of Florida Limited Partnership or	Limited Liability Limited Partnership)
<b>→</b>	, ,
FIRST: Reason for dissolution: (S	tate why partnership is submitting dissolution)
The general partner voted to dissolve f	rive Fritz Partners Limited Partnership.
	- A
SECOND: A Notice of Dissolution (Check box if at	Y;▶ ~·_
Department of State.)	date of filing:
not be listed as the document's effective da	te on the Department of State's records.
Signatures of each general partner or the per John Fritz, as President of General Partners	rson appointed pursuant to s. 670. 803(3) or (4) F.S.
F	
Filing Fee: Certified Copy (optional):	\$52.50 \$52.50
Certificate of Status (optional):	\$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.

Five Fritz Partners Limited Partnership	Limited Liabil	ity Limited Partn	ership:
Description of information that must be in-	cluded in a clair	n:	18 1AL
The amount of the claim and the facts giving n	ise to the claim.		E E
			27
	· · -=	<del></del>	
Mailing address where claims can be sent:	(Claims cannot be sen	t to the Florida Departme	m of State
Attn: John C. Friz			
2612 Oak Grove Ave.			
St. Augustine, Florida 32092			
A claim against the above named limited powill be barred unless a proceeding to enforce 4 years after the filing of the notice.	artnership or lince the claim is c	nited liability lim commenced withi	ited partnership n
Signature of a general partner or a principa	l of the successo	or entity:	
John Fritz, as Pres. of General Partner	L.F		
Printed Name		Signature	-

Fee: No charge if included with Certificate of Dissolution. If filed separately, \$52,50.