(Re	equestor's Name)				
(Ad	ldress)				
(Ad	ldress)				
(Cit	ty/State/Zip/Phone	#)			
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COVER LETTER

_		Section Corporations			
SUBJECT:	1	Partners/Ryan Tit	le Services, Ltd.	A03000001254	Ł
(1	Name of	Florida Limited Partnersh	ip or Limited Liability Limi	ited Partnership)	
The enclosed	l Certifi	cate of Dissolution an	nd fee(s) are submitted	for filing.	
Please return	all cor	respondence concerni	ng this matter to:		
James	G. Fa	err, Esq.			_ =
		(Contact Person)			VIS.
Partners Title Services Corporation				DE DE	
(Firm/Company)					04 (1) 126
1502 \	W. Fle	tcher Ave, Süite	101		OT JAN 26 PH
		(Address)			- H
Tampa	, Flor	rida 33612			07 JAN 26 PH 12: 36
		(City, State and Zip Code)	 		σ
For further in	ıformat	ion concerning this m	atter, please call:		
James (G. Far	r, Esq.	at (813)	962-0548 x 309	_
(Name of Contact Person)			aytime Telephone Number)	_	
Enclosed is a	check	for the following amo	unt:		
४ \$52.50 Filing	Fcc	\$61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee and Certified Copy	S113.75 Filing Fee, Certified Copy, and Certificate of Status	
STREET ADDRESS:		MAILING ADDRESS:			
Registration Section		Registration Section			
Division of Corporations		Division of Corporations			
Clifton Building 2661 Executive Center Circle		P. O. Box 6327 Tallahassee, FL 32314			
Tallahassec,			i ananassee,	16 36317	

CERTIFICATE OF DISSOLUTION FOR

Partners/Ryan Ti	tle Services, L	td.
(Name of Florida Limited F	Partnership or Limited I	Liability Limited Partnership)
Pursuant to the provisions of section partnership or limited liability limited Plorida Department of State on Certificate of Dissolution.		ose certificate was filed with the
FIRST: Reason for dissolution: (State why partnersh	nip is submitting dissolution)
Owner of 50% interes	st has elected	to dissolve
		Q7 JAN
	·	AN 25
SECOND: A Notice of Disso (Check box if atta-		C.
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 after the	e 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 appoi	nted pursuant to
Partners Title Services Con	poration _	
By: David B. Hyselield, President	<u> </u>	
Filing Fee:	\$52.50	
Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$8.75	,