

AD4 0000001063

of's FRANKIE FRUSE Phone 954 943-8721

pany EXCLONE POWER TECHNOLOGIES

655 601 NE PATH CT

State ZIP 33124-0607

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

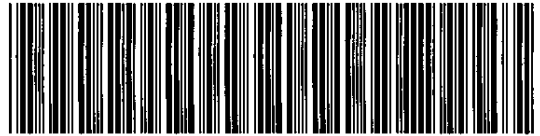
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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07/30/07--01048--017 \*\*52.50

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
07 AUG 15 PM 4:02

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** CYCLONE TECHNOLOGIES LLLP  
(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:

FRANKIE FRUGE  
(Contact Person)

(Firm/Company)

601 NE 26TH CT.

(Address)

POMPANO BEACH FL 33064

(City, State and Zip Code)

For further information concerning this matter, please call:

FRANKIE FRUGE  
(Name of Contact Person)

at ( 954 ) 943-8721  
(Area Code and Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$52.50 Filing Fee ☒ \$61.25 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

★ DEPT. OF STATE DID NOT RETURN. SHOULD  
BE ON FILE.

CERTIFICATE OF DISSOLUTION  
FOR

CYCLONE TECHNOLOGIES LLLP

(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 JUNE 29, 2004, hereby submits this Certificate of Dissolution.

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

UNANIMOUS CONSENT OF GENERAL  
PARTNER AND LIMITED PARTNERS  
AFTER SALE OF ALL ASSETS AND  
LIABILITIES.

**SECOND:** ☒ A Notice of Dissolution is attached.  
(Check box if attached.)

**THIRD:** Effective date, if other than the date of filing: DATE OF FILING

(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.:

SCHOELL CONSULTING INC.

By: [Signature]  
HARRY SCHOELL

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
07 AUG 15 PM 4: 02

**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.

Name of Dissolved Limited Partnership or Limited Liability Limited Partnership:

Cyclone Technologies LLP

Description of information that must be included in a claim:

Purchase order AND invoice

Mailing address where claims can be sent: (Claims cannot be sent to the Florida Department of State.)

601 NE 26th Court

Pompano Beach, FL 33064

A claim against the above named limited partnership or limited liability limited partnership will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of the notice.

Signature of a general partner or a principal of the successor entity:

FRANKIE FRUGE  
Printed Name

[Signature]  
Signature

**Fee: No charge if included with Certificate of Dissolution. If filed separately, \$52.50.**