e. 1883

## A0500000608

| (R                      | (equestor's Name)                      | <u> </u>  |
|-------------------------|--|-----------|
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| (A                      | ddress)                                |           |
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| (A                      | ddress)                                |           |
|                         |  |           |
| (C                      | ity/State/Zip/Phone                    | #)        |
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| PICK-UP                 | ☐ WAIT                                 | MAIL      |
|                         |  |           |
| - (R                    | usiness Entity Name                    | <i>a)</i> |
| (5                      | damess Littly Name                     |           |
|                         |  |           |
| (D                      | ocument Number)                        |           |
| *<br>                   |  |           |
| Certified Copies        | ertified Copies Certificates of Status |           |
|                         |  |           |
|                         |  | ·         |
| Special Instructions to | Filing Officer:                        |           |
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Office Use Only



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O7 APR 16 PM 12: 35
SECRETARY OF STATE
ALL ABASSES

## **COVER LETTER**

| Division of   | Corporations                                       |  |  |  |
|---|--|--|--|--|
| SUBJECT:  | Erling Private                                     | Equity L. ?                            |  |  |
| (Name of  | f Florida Limited Partnersh                        | nip or Limited Liability Lim           | ited Partnership)  |  |
| The enclosed Certif   | icate of Dissolution ar                            | nd fee(s) are submitted                | for filing.  |  |
| Please return all con   | respondence concerni                               | ng this matter to:                     |  |  |
| Paul Sil  | (Contact Person)                                   |  |  |  |
| ,   | (Contact Person)                                   |  |  |  |
|   | (Firm/Company)                                     |  |  |  |
| 75 NE 5   | Ah Ave, Unit (Address)  (City, State and Zip Code) | Н                                      |  |  |
|   | (Address)  |  |  |  |
| Vellay Seac   | (City, State and Zip Code)                         | 183                                    |  |  |
|   |  |  |  |  |
| For further information concerning this matter, please call:                                    |  |  |  |  |
| PAUL SILVER   |  | _at ( <u>\$61</u> ) <u>\$</u>          | 596-1752   |  |
| PAUL SILVER at (S6) S96-1752  (Name of Contact Person) (Area Code and Daytime Telephone Number) |  | Paytime Telephone Number)              |  |  |
| Enclosed is a check   | for the following amo                              | ount:                                  |  |  |
| \$52.50 Filing Fee  | \$61.25 Filing Fee and Certificate of Status       | \$105.00 Filing Fee and Certified Copy | \$113.75 Filing Fee,<br>Certified Copy, and<br>Certificate of Status |  |
| STREET ADDRES   | SS:  | MAILING.                               | ADDRESS:   |  |
| Registration Section  |  | Registration Section                   |  |  |
| Division of Corporations  |  | Division of Corporations               |  |  |
| Clifton Building  |  | P. O. Box 6327                         |  |  |
| 2661 Executive Center Circle  |  | Tallahassee,                           | FL 32314   |  |
| Tallahassee, FL 323   | 301  |  |  |  |

## CERTIFICATE OF DISSOLUTION FOR

FILED 07 APR 16 PM 12: 35

| Sterling Private Equity Limited Partner BADLADIASSEE, FLORIDA  (Name of Florida Limited Partnership or Limited Liability Limited Partnership)  |
|--|
| (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 March 28, 2005, hereby submits this Certificate of Dissolution. |
| FIRST: Reason for dissolution: (State why partnership is submitting dissolution)   |
| The business is no longer viable and the   |
| The business is no longer viable and the  Partners are pursuing different interests in new   |
| business entities  |
|  |
| SECOND: A Notice of Dissolution is attached.  (Check box if attached.)   |
| THIRD: Effective date, if other than the 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.:  |
| Vail Sie   |
|  |
|  |
| Filing Fee: \$52.50 Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75  |