## A05000001037

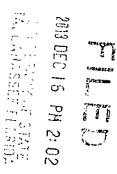
(Requestor's Name)	<del></del>			
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT	MAIL			
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of S	Status			
Special Instructions to Filing Officer:				
·				

Office Use Only



800254570888

12/16/13--01042--006 \*\*52.50



DEC 1 7 2013

## COVER LETTER

+

TO:	Registration Division of	. Section Corporations				
SUBJ	ECT: Fog	Sembler Capital F f Florida Limited Partnersh	PR 5 Limited, S.E. ip or Limited Liability Lim	ited Partnership)		
The e	nclosed Certif	icate of Dissolution an	d fee(s) are submitted	for filing.		
Please	e return all co	rrespondence concerni	ng this matter to:			
Deanr	n Lazzari Wojcio	cki				
		(Contact Person)		•		
The S	embler Compa	ny				
		(Firm/Company)			152	
5858	Central Avenue	<del>)</del>				ca 4y
	<u>, i</u>	(Address)			PEC.	i) i
St Pe	etersburg, FL 3	3707-1728			2013 DEC 1 6	) Jen.,
01.10	torsburg, r to 0	(City, State and Zip Code)	··· · · · · · · · · · · · · · · · · ·		£-41 -5	get ¥:
						esual E
For fu	urther informa	tion concerning this m	atter, please call:		1 2: 02 STATE "Unated	, ,
Deanr	n Lazzari Wojcio	cki	at ( 727 ) 38	4-6000, x3015_		
	(Name of Cor	ntact Person)	(Area Code and I	Daytime Telephone	e Number)	
Enclo	sed is a check	for the following amo	ount:			
<b>☑ \$</b> 52	.50 Filing Fee	\$61.25 Filing Fee and Certificate of Status	\$105.00 Filing Fee and Certified Copy	\$113.75 Fil Certified Copy Certificate of	y, and	
STR	EET ADDRE	SS:	MAILING	ADDRESS:		
Regis	Registration Section Registration Section					
	ion of Corpor	ations	Division of Corporations			
	on Building	ng P. O. Box 6327 ve Center Circle Tallahassee, FL, 32314				

Tallahassee, FL 32301

## CERTIFICATE OF DISSOLUTION FOR

Fog Sembler Capital PR 5 L (Name of Florida Limited Pa	imited, S.E. rtnership or Limited Liability Limited Partners	hip)
partnership or limited liability limite	620.1203, Florida Statutes, this Florida ded partnership, whose certificate was fil 24, 2005, assignout, hereby submits this Certificate.	ed with the
FIRST: Reason for dissolution: (S	tate why partnership is submitting disso	olution)
No longer doing business.		
SECOND: A Notice of Disso. (Check box if attack)		2918 DEC
THIRD: Effective date, if other than the d		<u> </u>
(Effective date cannot be prior to nor more Department of State.)	than 90 days after the date this document is fil	ed by the Florida
Signatures of each general partner o s. 620.1803(3) or (4), F.S.:	r the person appointed pursuant to	)2 )4
Shyong Demble.		
Filing Fee: Certified Copy (optional): Certificate of Status (optional):	\$52.50 \$52.50 \$8.75	



1



Via Federal Express Ground
December 13, 2013

Registration Section Florida Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



Re: Certificates of Dissolution

Dear Sir or Madam:

Enclosed are the Certificates of Dissolution for the following limited liability companies and/or limited partnership, along with our checks for the filing fees as indicated:

Entity Name	Document #	Check #	Amount Paid
Fog Sembler Capital PR 5, Limited, S.E. Sembler Family Partnership #26, ltd. Sembler/Sher Reserve, LLC Sembler/Wilherst Columbia, LLC	A05000001037	179189	\$52.50
	A02000000086	179191	\$52.50
	L11000135336	179190	\$52.50
	L10000097137	179192	\$25.00

We respectfully request that these dissolutions be effective as of the date of filing.

Please return your letter acknowledging the filing of these dissolutions to my attention at the address shown below.

5858 Central Avenue St. Petersburg, FL 33707-1728

If you have any questions, please do not hesitate to contact my office.

Sincerely,

Deann Lazzari Wojcicki Chief Financial Officer

Word.

DLW/vim K.DeannLtrs FLA DOS Dissolution Fog5\_SFP26\_SemSherReserve\_SWColumbia 12-13-13

**Enclosures**